

Fill in this information to identify the case:Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON
DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on January 30, 2018

x 
Signature of individual signing on behalf of debtor

George G. Wooten
Printed name

President
Position or relationship to debtor

Fill in this information to identify the case:Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON
DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ 4,046,000.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ 14,577,408.02**1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ 18,623,408.02**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 12,282,956.78**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 93,842.64**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 14,776,326.05**4. Total liabilities**
Lines 2 + 3a + 3b\$ 27,153,125.47

Fill in this information to identify the case:Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON
DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. SunTrust Bank	Deposit account	5576	\$0.00
3.2. SunTrust Bank	Lockbox	5576	\$55,893.00
3.3. SunTrust Bank	Checking	4830	\$533,335.00
3.4. BB&T	Payroll	5006	\$50,000.00

4. Other cash equivalents (Identify all)**5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$639,228.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Debtor WAYNE BAILEY, INC.
NameCase number (If known) 18-00284-5-SWH**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less:	<u>2,682,888.25</u>	-	<u>0.00</u>	=	<u>\$2,682,888.25</u>
	face amount		doubtful or uncollectible accounts		

11b. Over 90 days old:	<u>428,001.95</u>	-	<u>0.00</u>	=....	<u>\$428,001.95</u>
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$3,110,890.20**Part 4: Investments****13. Does the debtor own any investments?**

- ☐ No. Go to Part 5.
- ☒ Yes Fill in the information below.

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: % of ownership

15.1.	Mississippi Association of Sweet Potato Growers	<u> </u> %	<u> </u>	<u>\$1,000.00</u>
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15.2.	Mississippi Fruit & Vegetable Association Coop	<u> </u> %	<u> </u>	<u>\$10,000.00</u>
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15.3.	Aseptic Coop	<u> </u> %	<u> </u>	<u>\$2,500.00</u>
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15.4.	Trinity Frozen Foods LLC	<u>4</u> %	<u> </u>	<u>\$500,000.00</u>
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15.5.	Texas Sweet Potato Distributing, LLC	<u>100</u> %	<u> </u>	<u>\$34,108.00</u>
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16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

Debtor WAYNE BAILEY, INC.
NameCase number (If known) 18-00284-5-SWH17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$547,608.00**Part 5: Inventory, excluding agriculture assets**18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials Raw Sweet Potatoes - 34,014 18bu equivalent bins		\$0.00		\$2,615,509.70
20.	Work in progress Sweet Potatoes (at Maxton) #1s \$480,060.00 (6,858 18bu equivalent bins) Cantors \$50,058.00 (1,854 18bu equivalent bins)		\$0.00		\$530,118.00
21.	Finished goods, including goods held for resale Sweet Potatoes (packaged)		\$0.00		\$180,798.72
22.	Other inventory or supplies Cardboard		\$0.00		\$194,866.45
	Parts		\$0.00		\$89,919.97

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$3,611,212.8424. **Is any of the property listed in Part 5 perishable?**

- ☐ No
- ☒ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
- ☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

Debtor WAYNE BAILEY, INC.
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- ☐ No. Go to Part 7.
- ☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops-either planted or harvested			
29. Farm animals <i>Examples: Livestock, poultry, farm-raised fish</i>			
30. Farm machinery and equipment <i>(Other than titled motor vehicles)</i> Case IH 210 Magnum ZCRH05197 & Case IH FM1000 Auto Guidance System 04033	\$0.00		\$53,314.68
Irrigation equipment consisting of 2-7000 Valley; 4-Tower pivots, S/N 0024 and 0025	\$0.00		\$27,217.42
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6. Add lines 28 through 32. Copy the total to line 85.			\$80,532.10
34. Is the debtor a member of an agricultural cooperative? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative? <input type="checkbox"/> No <input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current Value _____			
36. Is a depreciation schedule available for any of the property listed in Part 6? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
37. Has any of the property listed in Part 6 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software Computer Equipment	\$0.00		\$10,000.00

Debtor WAYNE BAILEY, INC.
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42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86.

\$10,000.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☐ No☒ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2017 GMC Yukon XL K15 MP, Vin #14843	\$0.00		\$47,750.00
47.2. 2014 GMC Yukon MP, Vin# 20444	\$0.00		\$22,525.00
47.3. 2013 International Prostar Truck, VIN# 06218; 2011 International Prostar Truck, VIN# 65906; 2007 GMC Sierra Truck, VIN# 14249; 2007 GMC Sierra Truck, Vin 93262; 1985 Brothers Trailer, VIN# 21746	\$0.00		\$65,000.00
47.4. 2011 International Prostar Truck, VIN# 65679	\$0.00		\$12,758.49
47.5. See attached Exhibit "A"	\$0.00		\$200,000.00
47.6. 2013 International Prostar Truck, VIN# 06291 2013 international Prostar Truck, VIN# 83587 2013 International Prostar Truck, VIN# 66362	\$0.00		\$50,000.00

48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

Debtor WAYNE BAILEY, INC.
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Forklifts - See attached Exhibit "B"

\$0.00

\$24,000.00

See attached Exhibit "C"

\$0.00

\$1,300,000.00

Storage bins

\$0.00

\$123,290.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$1,845,323.49

52. **Is a depreciation schedule available for any of the property listed in Part 8?**☐ No☒ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes Fill in the information below.55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest****Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

55.1. 490 Old US Hwy 74
Chadbourn, NC
consisting of 221,550
Sq Ft building and 45
acres (Haworth
Facility) (\$2,750,000);
76.1 a. off of Carter
Road, Chadbourn
(Worley property)
(\$225,000)**Nature and extent of debtor's interest in property**

Fee simple

Net book value of debtor's interest (Where available)

\$0.00

Valuation method used for current value**Current value of debtor's interest**

\$2,975,000.00

Debtor	WAYNE BAILEY, INC.	Case number (If known)	18-00284-5-SWH	
	Name			
55.2.	211 Mills St & 322 E. Kirkland St, Chadbourn, NC consisting of 50,000 Sq. Ft. Bldg. (Orange Warehouse) (\$245,000) 326 E. Kirkland St., Chadbourn, NC, consisting of a 6,000 Sq. Ft. Bldg. (Blue Building) (\$60,000) 1405 Joe Brown Hwy S., Chadbourn, NC, consisting of 2 Bldg. at 6,000 Sq. Ft. each (Red & White Buildings) (\$75,000) 50 acres off Hwy 242, Evergreen, NC (B. More Farm/Harrison Farm) (\$140,000) Evergreen Farm Wells (\$0) 515 Porter Swamp Rd., Cerro Gordo, NC, consisting of 13.62 acres (Nance Farm) (\$41,000) Benton Farm Wells (\$0)	Fee simple	\$0.00	\$561,000.00
55.3.	Hwy 410, Chadbourn, NC, consisting of 59.42 acres (Harry Reed Property)		\$0.00	\$280,000.00
55.4.	5203 Haynes Lennon Way, Evergreen, NC (\$15,000) 323 Kirkland Street, Chadbourn, NC Grain Market (\$25,000) 506 Joe Brown Hwy, Chadbourn, NC Labor Camp consisting of 4,498 Sq ft labor camp and 2.08 acres (\$100,000) 607 Howard Street House, Chadbourn, NC (\$25,000)		\$0.00	\$165,000.00
55.5.	118 East Kirkland Street House, Chadbourn, NC		\$0.00	\$5,000.00

Debtor WAYNE BAILEY, INC. Case number (If known) 18-00284-5-SWH
 Name

55.6. 283 Carter Road
 House, Chadbourn,
 NC located on Carter
 Road with 2.86 acres \$0.00 \$60,000.00

56. **Total of Part 9.** \$4,046,000.00
 Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
 Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets See attached Exhibit "D"	\$0.00		Unknown

61. **Internet domain names and websites**

62. **Licenses, franchises, and royalties**

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.** \$0.00
 Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☒ No
☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

☒ No
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

Debtor WAYNE BAILEY, INC.
NameCase number (If known) 18-00284-5-SWH

- ☐ No. Go to Part 12.
- ☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**
Description (include name of obligor)
- | | | | | | |
|---------------------------|---------------------|---|----------------------------------|---|-----------------------|
| Trinity Frozen Foods, LLC | <u>2,700,000.00</u> | - | <u>0.00</u> | = | <u>\$2,700,000.00</u> |
| | Total face amount | | doubtful or uncollectible amount | | |
-
- | | | | | | |
|---------------------------|-------------------|---|----------------------------------|---|---------------------|
| Wooten Land & Timber, LLC | <u>580,208.00</u> | - | <u>0.00</u> | = | <u>\$580,208.00</u> |
| | Total face amount | | doubtful or uncollectible amount | | |
-
- | | | | | | |
|--------------------------------------|-------------------|---|----------------------------------|---|---------------------|
| Texas Sweet Potato Distributing, LLC | <u>787,829.94</u> | - | <u>0.00</u> | = | <u>\$787,829.94</u> |
| | Total face amount | | doubtful or uncollectible amount | | |
-
- | | | | | | |
|------------------------------|-------------------|---|----------------------------------|---|---------------------|
| Texas Sweet Potato Logistics | <u>315,024.45</u> | - | <u>0.00</u> | = | <u>\$315,024.45</u> |
| | Total face amount | | doubtful or uncollectible amount | | |
-
72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)
73. **Interests in insurance policies or annuities**
Western Reserve Life Assurance Co. of Ohio, Life insurance policy #3615 \$328,547.00
-
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** Examples: Season tickets, country club membership
- Insurance claim \$21,004.00
-
78. **Total of Part 11.**
Add lines 71 through 77. Copy the total to line 90. \$4,732,613.39
79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
☒ No
☐ Yes

Debtor WAYNE BAILEY, INC.
NameCase number (If known) 18-00284-5-SWH**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$639,228.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$3,110,890.20	
83. Investments. <i>Copy line 17, Part 4.</i>	\$547,608.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$3,611,212.84	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$80,532.10	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$10,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$1,845,323.49	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$4,046,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$4,732,613.39	
91. Total. Add lines 80 through 90 for each column	\$14,577,408.02	+ 91b. \$4,046,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$18,623,408.02

Wayne Bailey Inc.
Case No. 18-00248-5-SWH
Exhibit A

Year	Make	Model	VIN#
2003	Ford	Explorer	1FMZU72K63ZB49186
2008	GMC	Yukon	1GKFK163X8J219246
2010	Dodge	Grand Caravan	2D4RN4DE4AR238594
1997	Ford	F350	1FDKF37F8VEB81258
1991	Ford	Truck	1FDNF70J4MVA18401
1991	GMC	Truck	1GDM7H1J9MJ513410
2000	GMC	Truck	1GDJ7H1D5YJ904458
2000	GMC	Truck	1GDJ7H1D9YJ904334
1998	Ford	Truck	1FDNF70J3WVA02922
2001	Freightliner	FL70	1FVABSAL91HH62370
1994	International	Truck (cutoff bus)	1HVBDACN1RH575842
1994	International	Truck (cutoff bus)	1HVBDACN0RH576030
1995	International	Truck (cutoff bus)	1HVBDAAN2SH678650
1995	International	Truck (cutoff bus)	1HVBDAANXSH678752
1986	GMC	Truck (cutoff bus)	1GDL7D1BXGV508050
1987	Ford	Truck (cutoff bus)	1FDWJ74N3HVA04950
1992	International	Truck (cutoff bus)	1HVBBPEN9PH487043
1994	International	Truck (cutoff bus)	1HVBDACN2RH575719
1994	International	Truck (cutoff bus)	1HVBDACN6RH575903
1994	International	Truck (cutoff bus)	1HVBDACN8RH575823
1994	International	Truck (cutoff bus)	1HVBDACN9RH575703
1994	International	Truck (cutoff bus)	1HVBDAAN3SH678723
1994	International	Truck (cutoff bus)	1HVBDACN8RH575885
1994	International	Truck (cutoff bus)	1HVBDACN5RH575908
1994	International	Truck (cutoff bus)	1HVBDACN5RH575830
1994	International	Truck (cutoff bus)	1HVBDACNXRH575841
1994	International	Truck (cutoff bus)	1HVBDACN2RH575901
1994	International	Truck (cutoff bus)	1HVBDACN9RH575829
1995	International	Truck (cutoff bus)	1HVBDAAN4SH678942
1995	International	Truck (cutoff bus)	1HVBDAAN4SH679069
1995	International	Truck (cutoff bus)	1HVBDAANXSH679111
1995	International	Truck (cutoff bus)	1HVBBAAN1SH678371
1996	International	Truck (cutoff bus)	1HVBDAAN9TH309267
1994	International	Bus (15 people)	1HVBDACM1RH575654
1992	International	Bus (40 people)	1HVBBPLN9NH463793
1997	Ford	Bus (40 people)	1FDXB80C9VVA30346
1997	Ford	Bus (40 people)	1FDXB80C3VVA30553
1989	Chevy	Bus (40 people)	1GBM6P1F5KV104201
1994	International	Bus (40 people)	1HVBDACN2RH576322
1999	International	Truck	2HSFHAER2XCO86843
2003	Kenworth	Truck	1XKTDB9X03J709494
2005	Freightliner	Truck	1FUJA6DE05LN51764
1987	Great Dane	Trailer	1GRAA9621FS090504
1997	Fontier	Trailer	13N1483008V1573275

1998	Jerry	Trailer	4BXUN10154S306069
1998	Tran	Trailer	1TTF48203W1055611
2013	Vanguard	Reefer	527SR5326DM001685
2001	Ford	F150	1FTRX18W11NB14028
1998	Dodge	Van	2B5WB35Z7WK133254
1994	Ford	Truck	1FDJF37H5RNA02712
1996	Dodge	Van	2B5WB3528TK171152
1998	Dodge	Van	2B7LB31Z3WK147264
2002	GMC	Truck	2GTEK19V821163765
2004	GMC	Sierra	1GTEK19T94E378863
2011	Chevy	Silverado	1GCRKPE0XBZ197566
1994	Dodge	Van	2B5WB35Z4RK144801
2000	Ford	F150	1FTZF1729YNC37541
2002	Ford	F250	1FDNX21L32EB11102
2004	GMC	Sierra	2GTEK19V341319049
2006	GMC	Sierra	1GTHK23D86F236604
2007	GMC	Sierra	3GTEC14X27G233717
2007	GMC	Sierra	1GTEK14C27Z590802
2008	Chevy	Silverado	1GCEC14X88Z172570
2008	GMC	Sierra	1GTHK23608F200216
TOTAL VALUE:			\$200,000.00

Wayne Bailey, Inc.
Case No. 18-00248-5-SWH
Exhibit B

<u>Unit ID #</u>	<u>Model/Serial #</u>	<u>Year</u>
10000002679	7FBEU18 16020	2006
10000002682	7FBCU15 63320	2006
10000123824	8FGU25-13508	2007
10000183539	8FGU32-38950	2013
10000183540	8FGU32-38895	2013
10000183541	8FGU32-38923	2013
10000183542	8FGU32-38854	2013
10000183543	8FGU32-38922	2013
10000183544	8FGU32-38813	2013
10000183545	8FGU32-38853	2013
10000183546	8FGU32-38795	2013
10000227897	8FGU32-65014	2015

TOTAL VALUE: \$24,000.00

Wayne Bailey, Inc.
Case No. 18-00248-5-SWH
Exhibit B

<u>Unit ID #</u>	<u>Model/Serial #</u>	<u>Year</u>
10000002679	7FBEU18 16020	2006
10000002682	7FBCU15 63320	2006
10000123824	8FGU25-13508	2007
10000183539	8FGU32-38950	2013
10000183540	8FGU32-38895	2013
10000183541	8FGU32-38923	2013
10000183542	8FGU32-38854	2013
10000183543	8FGU32-38922	2013
10000183544	8FGU32-38813	2013
10000183545	8FGU32-38853	2013
10000183546	8FGU32-38795	2013
10000227897	8FGU32-65014	2015

TOTAL VALUE: \$24,000.00

Wayne Bailey, Inc.
Case No. 18-00248-5-SWH
Exhibit C

Type	ID/Serial number	Manufacturer	Model year
CVT Tractor	ZERD02949	Case IH	2014
Tractor	ZEBP12228	Case IH	2014
Turbo Disk 31 FT	YED075104	Case IH	2014
Ecolo Till Ripper 7	YED073157	Case IH	2014
Self-Propelled Spray	1N04030RJE0001020	John Deere	2014
2 Row Peturis Potato			
Grain Dryer & Elevat			
Case IH Tractor			
Digger	95135		
Digger	30295		
International 5240 T	A26W51535		
Packing Line/Equipme	A26W51593		
Ford 7610 Tractor	RW7700H011408		
Ford 7610 Tractor			1995
Toyota Forklift	RW830P022163		1996
JD Tractor 7410			
Toyota (2)			2001
Row Crop Tractor	RW7410H012477		
Case MX 180 Tractor	DEG0005834		2002
John Deere	N00637X005172		
Case Intl Harvester	SNACM218073		2004
JD 8320 Tractor	RW8320PO32308		2005
John Deere Row Crop	01236		2004
Toyota Forklift	12047		
John Deere Tractor	PO37178		
Hobbs Reel			
John Deere Power uNI	T06068T479552		
PSI Reel Rain Reel G	27213		
John Deere 630 Tract			
John Deere Plow			
Ripper			
Woods Alloway			
Grader			
Irrigation Pipe			
Irrigation Equipment			
John Deere Rotary Cu			
Cultivator			
Reddick Sprayer			
8 Row Cotton Sprayer			
Vac Master Mower			
15" Grassworks weed			

Irrigation Equipment
 Sprayer
 Rhino Ditch Bank Cut
 2 Sheppard Sprayer
 2 Cultivators
 12000 Gallon Nitroge
 Humidification Equip
 Eliminator
 Scales
 6 Lane Metered Input
 Pressure Washer
 3 Phase Electric Mot
 Slicer
 Compressor
 Alloway Flail Shredd
 Rolling Cultivator
 Bush Hog
 Irrigation Equipment
 4 Row Cultivator
 Bedder
 Disc
 Tender Box
 Potato Plow
 Plant Mower
 Front End Loader
 5 Shelf Propelled Ha
 Case IH Puma 125 Tra
 John Deere Sprayer
 John Deere 172012 Ro
 Case IH Maxxum Tract
 John Deere HX20 Cutt
 Case IH Puma Tractor
 Case IH Tandem Disk
 Case IH Magnum 305 T
 Buffalo 6200 Plow
 Holland 1600 Transpl
 Case IH Magnum 235 T
 OnPack RC20145 VPP S
 2015 Toyota Forklift
 Case IH Puma 150 PS
 Case IH Magnum 235 T
 John Deere 6420 Trac
 John Deere Lawn Mover 72" Deck
 Case IH Maxxum Tractor 125
 Krause 7300 Disk Harrows 2371

Z8BL02027	2008
N04730X002411	2008
A0172OR700163	2005
ZABE01955	
ZABL40880	2010
JFH046229	2011
ZARZ07926	2011
20116205149	2011
	2011
ZBRD02892	2012
ZRC2045	
65019	
ZFEP30295	2016
ZDRD05839	2013
H381259	2003
	2017
ZFEE03996	2016

TOTAL VALUE:

\$1,300,000.00

Wayne Bailey, Inc.
Case No. 18-00248-5-SWH
Exhibit D

Trademarks

Trademark	Filing Date	Serial No	Reg No	Reg. Date
George Foods	15-Apr-2011	85296428	4082792	10-Jan-2012
Girl Watcher	15-May-1989	73799880	1611450	28-Aug-1990
Good-Buy A Good-Buy	15-May-1989	73799851	1584999	27-Feb-1990
LPB	25-Aug-1997	75346345	2178603	04-Aug-1998
Nutritional All Stars	25-Aug-1997	75346347	2312865	01-Feb-2000
Nutritional Bridge to the 21 st Century	09-Jan-1997	75222926	2121715	16-Dec-1997
Nutritionally Fresh	05-Aug-1999	75768188	2344240	18-Apr-2000
Petitelings	14-Apr-2016	87000570	5307524	10-Oct-2017
Sweet Potato Petitelings	14-Apr-2016	87000542	5307523	10-Oct-2017
Playboy	15-May-1989	73799881	1577996	16-Jan-1990
Play Boy	15-May-1989	73799845	1584997	27-Feb-1990
Playboy Design	15-May-1989	73799849	1584998	27-Feb-1990
Sweet Potato Fries-Sweet Sensations-The Sensible Side	15-Apr-2011	85296310	4160022	19-Jun-2012
Sweet Potato Frizzles	15-Apr-2011	85296242	4070146	13-Dec-2011
Sweet Potato Hearts	15-Oct-1996	75181329	2105367	14-Oct-1997
The Louisiana Playboy	25-Aug-1997	75346348	2176926	28-Jul-1998
With That Cajun Beta Carotene Beat ... And Good To Eat	25-Aug-1997	75346344	2175137	21-Jul-1998
You Choose How They Sizzle – Baked or Fried	15-Apr-2011	85296192	4056299	15-Nov-2011

Domain Names

sweetpotatoes.com

Fill in this information to identify the case:Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.*Column A***Amount of claim**

Do not deduct the value of collateral.

*Column B***Value of collateral that supports this claim****2.1** ALLY

Creditor's Name

Attn.: Manager or Agent
P.O. Box 90201948
Louisville, KY 40290-1948

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.**Describe debtor's property that is subject to a lien**
2017 GMC Yukon XL K15 MP, Vin #14843\$56,097.47\$47,750.00**Describe the lien**Lien on title**Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.2** Branch Banking & Trust

Creditor's Name

Attn: Jack Hayes
PO Box 1847
Wilson, NC 27894

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?****Describe debtor's property that is subject to a lien**
Hwy 410, Chadbourn, NC, consisting of 59.42 acres (Harry Reed Property)\$4,419.50\$280,000.00**Describe the lien****Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

Debtor WAYNE BAILEY, INC. Case number (if know) 18-00284-5-SWH
Name☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**2.3 Cape Fear Farm Credit**

Creditor's Name

Attn: Mgr, Officer or Agent
P.O. Box 2405
Fayetteville, NC 28302

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.**Describe debtor's property that is subject to a lien**

490 Old US Hwy 74 Chadbourn, NC consisting of 221,550 Sq Ft building and 45 acres (Haworth Facility) (\$2,750,000); 76.1 a. off of Carter Road, Chadbourn (Worley property) (\$225,000)

\$2,012,674.19

\$2,975,000.00

Describe the lien**Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 CFG Financial Services, LLC**

Creditor's Name

Attn: Mgr, Agent or Officer
100 Elks Club Road
Brevard, NC 28712

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.**Describe debtor's property that is subject to a lien**

5203 Haynes Lennon Way, Evergreen(\$15,000); 323 Kirkland, Chadbourn(\$25,000);506 Joe Brown, Chadbourn (2.08 a.)(\$100,000);607 Howard St (\$25,000) & personal property (\$14,098,842.43)

\$7,534,223.56

\$14,263,842.43

Describe the lien**Is the creditor an insider or related party?**☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.5 CNH Capital**

Creditor's Name

Attn: Managing Agent
PO Box 0507
Carol Stream, IL 60132-0507

Creditor's mailing address

Describe debtor's property that is subject to a lien

Case IH 210 Magnum ZCRH05197; Case IHFM1000 Auto Guidance System 04033

\$53,314.68

\$53,314.68

Describe the lien

Debtor WAYNE BAILEY, INC.
NameCase number (if know) 18-00284-5-SWH

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.6 Diversified Financial

Creditor's Name

Attn: Managing Agent
PO Box 2056
Omaha, NE 68103-2056

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Irrigation Equipment-2 Model 7000 Valley Tower pivots, S/N 0024 & 0025

\$27,217.42

\$27,217.42

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.7 Horry County State Bank

Creditor's Name

Attn: Managing Agent
PO Box 677
Conway, SC 29528

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

2014 GMC Yukon MP, Vin# 20444

\$26,101.24

\$22,525.00

Describe the lien

Lien on Title

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:
Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Case number (if know) 18-00284-5-SWH

2.8	Kissam, Ruth Creditor's Name 109 Kissam Lane Evergreen, NC 28438 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number	Describe debtor's property that is subject to a lien 283 Carter Road House, Chadbourn, NC located on Carter Road with 2.86 acres Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$46,830.92 \$60,000.00
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M2 Funding	Describe debtor's property that is subject to a lien	\$62,375.92	\$65,000.00
Creditor's Name	2013 International Prostar Truck, VIN# 06218; 2011 International Prostar Truck, VIN# 65906; 2007 GMC Sierra Truck, VIN# 14249; 2007 GMC Sierra Truck, Vin 93262; 1985 Brothers Trailer, VIN# 21746		
Attn: Manager or Agent 175 N. Patrick Blvd, Ste. 140 Brookfield, WI 53045	Describe the lien		
Creditor's mailing address	Lien on Title		
Creditor's email address, if known	Is the creditor an insider or related party?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
	Is anyone else liable on this claim?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
Date debt was incurred			
Last 4 digits of account number			
Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is:		
<input checked="" type="checkbox"/> No	Check all that apply		
<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		

2.1 0	Millstream Farms <hr/> Creditor's Name Attn: Manager or Agent 1131 Timothy Road Dunn, NC 28334 <hr/> Creditor's mailing address	Describe debtor's property that is subject to a lien 211 Mills & 322 E. Kirkland(\$245,000);326 E. Kirkland(\$60,000);1405 Joe Brown Hwy S(\$75,000), Chadbourn;50a.Evergreen(\$140,000);13.62 a.(\$41,000); 2nd D/T 49.42 a., Chadbourn (\$275,580.50) & personal property of \$6,729,618.87 <hr/> Describe the lien <hr/> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No	\$2,397,839.37 <hr/>	\$7,566,199.37 <hr/>
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Debtor WAYNE BAILEY, INC. Case number (if know) 18-00284-5-SWH
Name

Creditor's email address, if known

☐ Yes

Is anyone else liable on this claim?

Date debt was incurred

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.1
1

River Valley Capital

Creditor's Name

Attn: Manager or Agent
14868 W Ridge Lane Suite
200
Dubuque, IA 52003

Creditor's mailing address

Describe debtor's property that is subject to a lien

2011 International Prostar Truck, VIN# 65679

\$12,758.49

\$12,758.49

Describe the lien

Lien on title

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.1
2

Stearns Bank

Creditor's Name

Attn: Managing Agent
500 13th St.
Albany, MN 56307

Creditor's mailing address

Describe debtor's property that is subject to a lien

2013 International Prostar Truck, VIN# 06291
2013 international Prostar Truck, VIN# 83587
2013 International Prostar Truck, VIN# 66362

\$49,104.02

\$50,000.00

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Debtor WAYNE BAILEY, INC. Case number (if know) 18-00284-5-SWH
Name

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$12,282,956.
78

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Columbus Co. Tax Collector Attn: Manager or Agent P.O. Box 1468 Whiteville, NC 28472 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$73,736.05	\$73,736.05
2.2	Priority creditor's name and mailing address Department of Commerce Employment Security Division P.O. Box 26504 Raleigh, NC 27611 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$890.43	\$890.43

Debtor	WAYNE BAILEY, INC. Name	Case number (if known)	18-00284-5-SWH	
2.3	Priority creditor's name and mailing address Internal Revenue Service Alamance Bldg Mail Stop 9 4905 Koger Blvd Ste 102 Greensboro, NC 27407	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.4	Priority creditor's name and mailing address N.C. Dept. of Revenue ATTN: Manager, Agent or Office Office Svcs Div, Bankruptcy Un P. O. Box 1168 Raleigh, NC 27602-1168	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,754.54	\$6,754.54
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.5	Priority creditor's name and mailing address Sampson County Tax Coll Attn: Managing Agent PO Box 207 Clinton, NC 28329	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$12,461.62	\$0.00
	Date or dates debt was incurred	Basis for the claim: Property Taxes		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.6	Priority creditor's name and mailing address Town of Chadbourn Attn: Manager or Agent 602 N. Brown Street Chadbourn, NC 28431	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor <u>WAYNE BAILEY, INC.</u>		Case number (if known) <u>18-00284-5-SWH</u>
Name		

3.1	Nonpriority creditor's name and mailing address Advance Auto Parts Attn: Manager or Agent 817 N. Brown Street Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$398.67</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address Advantage Auto Clinton Attn: Manager or Agent 210 South East Blvd. Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,211.39</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address AG Lines, Inc. Attn: Manager or Agent 8546 W. 103rd Terrace Unit 101 Palos Hills, IL 60465 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,352.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address Airgas USA, LLC Attn: Manager or Agent P.O. Box 532609 Atlanta, GA 30353-2609 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$408.45</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address Al's Transportation & Logistic Attn: Manager or Agent 4905 Tarheel Court, #203 Wilmington, NC 28403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,620.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address Allegiance Retail Services, LL Attn: Manager or Agent 485 Route 1 South Bldg D, Suite 420 Iselin, NJ 08830 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$500.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Alliance Funding Group, Inc. Attn: Manager or Agent 3745 W. Chapman Avenue Suite 200 Orange, CA 92868 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,595.49</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.8	Nonpriority creditor's name and mailing address AM-PM Carriers Attn: Manager or Agent 9444 Deer Crossing Trace Jonesboro, GA 30236 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,400.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address American Express Attn: Officer, Manager or Agent PO Box 981535 El Paso, TX 79998-1535 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$15,836.46</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Applied Vision Works, Inc. Attn: Manager or Agent 4009 Village Park Drive Knightdale, NC 27545 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$8,859.37</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address AquaPulse Systems, Inc. Attn: Manager or Agent 16117 Covello Street Van Nuys, CA 91406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$7,964.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address Armstrong Transport Group, Inc Attn: Manager or Agent P.O. Box 745100 Atlanta, GA 30374 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,500.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address Atlantic Corporation Attn: Manager or Agent P.O. Box 60002 Charlotte, NC 28260 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$20,919.23</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address ATMC Attn: Manager or Agent P.O. Box 3198 Shallotte, NC 28459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$81.15</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.15	Nonpriority creditor's name and mailing address Auto Parts Express Attn: Manager or Agent 140 E. Main Street Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154.84
3.16	Nonpriority creditor's name and mailing address B&B Technology & Svcs, Inc. Attn: Manager or Agent 138 Ludlow Drive Wilmington, NC 28411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,376.29
3.17	Nonpriority creditor's name and mailing address B.J. Williamson, Inc. Attn: Manager or Agent 820 Elizabeth Street Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,216.70
3.18	Nonpriority creditor's name and mailing address Ball Brokerage Attn: Manager or Agent 600 South State Street Clarks Summit, PA 18411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$130.00
3.19	Nonpriority creditor's name and mailing address Barbour, Shepard 5239 Zacks Mill Road Angier, NC 27501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,800.00
3.20	Nonpriority creditor's name and mailing address Greg Barnhill P.O. Box 5 Evergreen, NC 28438 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,886.49
3.21	Nonpriority creditor's name and mailing address Battleboro Produce, Inc. Attn: Manager or Agent 42 Cool Spring Road Battleboro, NC 27809 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,962.00

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3.22	Nonpriority creditor's name and mailing address Beckham Logistics LLC Attn: Manager or Agent 271 Southwood Road Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,300.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	Nonpriority creditor's name and mailing address Big Blue Store of Clinton Attn: Manager or Agent P.O. Box 1219 Clinton, NC 28329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,117.87</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	Nonpriority creditor's name and mailing address Blue Cross & Blue Shield of NC Attn: Manager, Agent, Officer P.O. Box 580094 Charlotte, NC 28258-0094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$31,977.20</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.25	Nonpriority creditor's name and mailing address Bonanza Produce, Inc. Attn: Manager or Agent P.O. Box 3088 Immokalee, FL 34143 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$63.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.26	Nonpriority creditor's name and mailing address Bosch Packaging Services, Inc. Attn: Manager or Agent 36809 Treasury Center Chicago, IL 60694 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,847.28</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.27	Nonpriority creditor's name and mailing address Boyette Brothers Produce, LLC Attn: Manager or Agent 6638 Radio Tower Road Wilson, NC 27893 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$190,985.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.28	Nonpriority creditor's name and mailing address Matt Brown 6670 Highway 701 N Conway, SC 29526 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$30,860.44</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.29	Nonpriority creditor's name and mailing address Budget Printing Attn: Manager or Agent 1424 S. J.K. Powell Blvd. Suite B Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,706.15
3.30	Nonpriority creditor's name and mailing address Burch Farms Attn: Manager or Agent P.O. Box 399 Faison, NC 28341 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,500.00
3.31	Nonpriority creditor's name and mailing address BW Tire Repair Attn: Manager or Agent 2321 Beaman Woods Road Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,034.46
3.32	Nonpriority creditor's name and mailing address C and T Bright Trucking Attn: Manager or Agent P.O. Box 192 Seven Springs, NC 28578 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,750.00
3.33	Nonpriority creditor's name and mailing address Cape Fear Propane Attn: Manager or Agent P.O. Box 1130 Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,284.39
3.34	Nonpriority creditor's name and mailing address Carmichael Farms Attn: Manager or Agent P.O. Box 1547 Laurinburg, NC 28353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$493,181.00
3.35	Nonpriority creditor's name and mailing address Carmichael Farms Attn: Eddie Carmichael P.O. Box 1547 Laurinburg, NC 28353 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33.96

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3.36	Nonpriority creditor's name and mailing address Castellini Company Attn: Manager or Agent P.O. Box 721610 Newport, KY 41072-1610 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$139,258.75
<hr/>			
3.37	Nonpriority creditor's name and mailing address Category Partners, LLC Attn: Manager or Agent 2155 Providence Way Idaho Falls, ID 83404 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$263.46
<hr/>			
3.38	Nonpriority creditor's name and mailing address Cintas Attn: Manager or Agent 512 W. Russell Street Fayetteville, NC 28301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92.81
<hr/>			
3.39	Nonpriority creditor's name and mailing address Clinton Truck & Tractor, Inc. Attn: Managing Agent 107 Northeast Blvd Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,294.81
<hr/>			
3.40	Nonpriority creditor's name and mailing address Coastal Group Corporation, Inc c/o Coastal Temporary Services P.O. Box 1860 Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$308,647.70
<hr/>			
3.41	Nonpriority creditor's name and mailing address Connecting Point Attn: Manager or Agent P.O. Box 426 Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,228.23
<hr/>			
3.42	Nonpriority creditor's name and mailing address Cooperative Grading Service Attn: Manager or Agent P.O. Box 588 Williamston, NC 27892 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$332.10

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3.43	Nonpriority creditor's name and mailing address Cousins Logistics, Inc. Attn: Manager or Agent 4400 Biscayne Blvd., Ste 850 Miami, FL 33137 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address Cowan Systems, LLC Attn: Manager or Agent 4555 Hollins Ferry Road Halethorpe, MD 21227 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$24,225.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	Nonpriority creditor's name and mailing address Cregger Company, Inc. Attn: Manager or Agent P.O. Box 2197 Columbia, SC 29202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$19.76</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Nonpriority creditor's name and mailing address CV Pilson Attn: Manager or Agent 108 CVP Lane Cameron, NC 28326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,789.80</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address Darden Restaurants, Inc. Attn: Manager or Agent 1000 Darden Center Drive Orlando, FL 32837 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,942.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address DAUMAR Corporation Attn: Manager or Agent 12395 SW 130th Street Miami, FL 33186 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,742.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address Davis Lift Truck Svc. Attn: Manager or Agent P.O. Box 469 Hope Mills, NC 28348 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,040.32</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.50	Nonpriority creditor's name and mailing address Delane's Truck Brokerage Inc. Attn: Manager or Agent P.O. Box 2037 Haines City, FL 33844 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,230.00</u>
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3.51	Nonpriority creditor's name and mailing address DeltaTrak Attn: Manager or Agent P.O. Box 4115 Modesto, CA 95352 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,039.68</u>
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3.52	Nonpriority creditor's name and mailing address Dennis McPherson Trucking Attn: Manager or Agent 3273 Cameron Hill Road Cameron, NC 28326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,800.00</u>
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3.53	Nonpriority creditor's name and mailing address DGW Forms & Systems Attn: Manager or Agent P.O. Box 3745 Wilmington, NC 28406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,765.02</u>
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3.54	Nonpriority creditor's name and mailing address Diaston Transport, LLC Attn: Manager or Agent 1112 Patty Road Cades, SC 29518 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,056.00</u>
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3.55	Nonpriority creditor's name and mailing address Diesel Parts of Carolina, LLC Attn.: Manager or Agent 5220 Hwy 421 N. Wilmington, NC 28401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,370.31</u>
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3.56	Nonpriority creditor's name and mailing address Dillon Supply Company Attn: Manager or Agent P.O. Box 602541 Charlotte, NC 28260-2541 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$394.57</u>
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3.57	Nonpriority creditor's name and mailing address Dixon Farm Attn: Manager or Agent 1884 Dixon Road Aynor, SC 29511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$28,894.99</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address DLC Transport Attn: Manager or Agent 603 Fain Court Moncks Corner, SC 29461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,600.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address Don Jordan's Portable Toilet Attn: Manager or Agent P.O. Box 1898 Clinton, NC 28329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,050.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	Nonpriority creditor's name and mailing address Doreva Produce Attn: Manager or Agent 12437 W. Magnolia Avenue Livingston, CA 95334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,850.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61	Nonpriority creditor's name and mailing address Durand-Wayland, Inc. Attn: Manager or Agent P.O. Box 1404 Lagrange, GA 30241-0119 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$23,648.32</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address Ecolab Attn: Manager or Agent P.O. Box 6007 Grand Forks, ND 58206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$7,010.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address Edward Bros Properties, LLC Attn: Manager or Agent 305 E. Oliver Street Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,375.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.64	Nonpriority creditor's name and mailing address John D. Elliott P.O. Box 363 Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,346.47</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.65	Nonpriority creditor's name and mailing address John D. Elliott P.O. Box 363 Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$50,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.66	Nonpriority creditor's name and mailing address Elliott, John D. P.O. Box 363 Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$54,082.93</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.67	Nonpriority creditor's name and mailing address England Logistics, Inc. Attn: Manager or Agent 1325 South 4700 West Salt Lake City, UT 84104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$7,556.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.68	Nonpriority creditor's name and mailing address Fed-Ex Attn: Managing Agent PO Box 371461 Pittsburgh, PA 15250-7461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,714.87</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.69	Nonpriority creditor's name and mailing address Feeding America Attn: Manager or Agent 35 East Wacker Drive Suite 2000 Chicago, IL 60601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,763.75</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.70	Nonpriority creditor's name and mailing address First Star Logistics, LLC Attn: Manager or Agent 1762 Ridgewood Circle Lawrenceburg, IN 47025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$58,447.42</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.71	Nonpriority creditor's name and mailing address Frank Donio, Inc. Attn: Manager or Agent Old Egg Harbor Road Hammonton, NJ 08037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$17,890.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	Nonpriority creditor's name and mailing address Frank Horne Construction, Inc. Attn: Manager or Agent P.O. Box 532 Fair Bluff, NC 28439 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$609.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Nonpriority creditor's name and mailing address Freight All Kinds, Inc. Attn: Manager or Agent P.O. Box 5187 Denver, CO 80217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,821.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address G&S Transport, LLC Attn: Manager or Agent 13514 Glen Harwell Road Dover, FL 33527 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,700.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Nonpriority creditor's name and mailing address Gallop Farms Attn: Manager or Agent 4832 Rivers Bridge Road Ehrhardt, SC 29081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,440.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.76	Nonpriority creditor's name and mailing address Gay Farms Attn: Manager or Agent 930 Meadows Road Walstonburg, NC 27888 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$166,419.13</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address Giro-Pack, Inc. Attn: Manager or Agent P.O. Box 171137 Hialeah, FL 33017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,559.64</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.78	Nonpriority creditor's name and mailing address GlobalTranz Enterprises Inc. Attn: Manager or Agent 5415 E. High St., Bldg. A9 Suite 460 Phoenix, AZ 85054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,695.00
<hr/>			
3.79	Nonpriority creditor's name and mailing address Godwin Produce Attn: Manager or Agent P.O. Box 163 Dunn, NC 28334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400.00
<hr/>			
3.80	Nonpriority creditor's name and mailing address Mike Godwin 5904 Timothy Road Dunn, NC 28334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,004.00
<hr/>			
3.81	Nonpriority creditor's name and mailing address Goodwin Refrigeration Attn: Manager or Agent 335 Sherwee Drive Suite 109 Raleigh, NC 27603 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,041.24
<hr/>			
3.82	Nonpriority creditor's name and mailing address Gore & Associates Management Attn: Manager or Agent P.O. Box 2001 Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,088.62
<hr/>			
3.83	Nonpriority creditor's name and mailing address Grayson Transport, LLC Attn: Manager or Agent 1876 Cameron Heights Circle Denver, NC 28037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
<hr/>			
3.84	Nonpriority creditor's name and mailing address Green Thumb Farms Attn: Manager or Agent P.O. Box 147 Fryeburg, ME 04037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,108.80

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3.85	Nonpriority creditor's name and mailing address Hagan Electronics, Inc. Attn: Manager or Agent 972 United Circle Sparks, NV 89431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$27,923.43</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.86	Nonpriority creditor's name and mailing address Harden Farms, Inc. Attn.: Manager or Agent 746 Cooper Hill Road Windsor, NC 27983 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$14,601.31</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address Harvey Farms Attn: Manager or Agent P.O. Box 189 Kinston, NC 28502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$31,020.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address Harvey Farms Attn: Manager or Agent P.O. Box 189 Kinston, NC 28502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$272,826.05</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.89	Nonpriority creditor's name and mailing address Harvey's Southeast-Whiteville Attn: Manager or Agent P.O. Box 1219 Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$4,920.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.90	Nonpriority creditor's name and mailing address Hayes Auto Supply Co., Inc. Attn: Manager or Agent P.O. Box 354 Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,307.05</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Nonpriority creditor's name and mailing address Hayes Brothers Farms Attn: Joe Hayes 1522 Singletary Church Road Lumberton, NC 28358 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$503,594.94</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.92	Nonpriority creditor's name and mailing address Hendrix Farms Attn: Manager or Agent P. O. Box 175 Metter, GA 30439 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,880.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.93	Nonpriority creditor's name and mailing address Herald Office Supply Attn: Manager or Agent P.O. Box 1288 Dillon, SC 29536 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,251.97 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.94	Nonpriority creditor's name and mailing address Roy Herring 1959 Regan Church Road Lumberton, NC 28358 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$168,957.53 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Contract Grower</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.95	Nonpriority creditor's name and mailing address Hi-Tech Enterprises, Inc. Attn: Manager or Agent P.O. Box 466 Clinton, NC 28329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$180.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.96	Nonpriority creditor's name and mailing address Kendall Hill 2574 Hugo Road Grifton, NC 28530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$39,856.59 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.97	Nonpriority creditor's name and mailing address Hill, Patricia 2574 Hugo Road Grifton, NC 28530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$202,500.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.98	Nonpriority creditor's name and mailing address Hill, Robert 4445 Research Road Hookerton, NC 28538 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$165,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.99	Nonpriority creditor's name and mailing address Bobby Hope 750 Boney Mill Road Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$162,868.24
<hr/>			
3.100	Nonpriority creditor's name and mailing address Dewayne Hope 6918 Garland Highway Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$162,868.24
<hr/>			
3.101	Nonpriority creditor's name and mailing address Johnny Hope 305 Malpass Farm Lane Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$299,339.00
<hr/>			
3.102	Nonpriority creditor's name and mailing address Howell, Bruce 118 Oak Heights Drive Goldsboro, NC 27530 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,600.00
<hr/>			
3.103	Nonpriority creditor's name and mailing address Josh Hudson 553 Rosin Hill Road Newton Grove, NC 28366 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,568.75
<hr/>			
3.104	Nonpriority creditor's name and mailing address Huntington Technology Finance Attn: Manager or Agent P.O. Box 2017 Bloomfield Hills, MI 48303 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,866.12
<hr/>			
3.105	Nonpriority creditor's name and mailing address Ice Companies, Inc. Attn: Manager or Agent P.O. Box 66 Wilmington, NC 28402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$412.00

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3.106	Nonpriority creditor's name and mailing address Industrial Brush Corporation Attn: Manager or Agent P.O. Box 2608 Pomona, CA 91769-2608 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$7,568.85</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	Nonpriority creditor's name and mailing address Industrial Power, Inc. Attn: Manager or Agent 703 Whitfield Street Fayetteville, NC 28306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$34,980.51</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address Industrial Power, Inc. Attn: Manager or Agent 703 Whitfield Street Fayetteville, NC 28306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$13,073.55</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address Integrity Express Logistics Attn: Manager or Agent P.O. Box 938 West Chester, OH 45071 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,750.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110	Nonpriority creditor's name and mailing address International Paper Attn: Manager or Agent P.O. Box 841723 Dallas, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$410,933.97</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.111	Nonpriority creditor's name and mailing address J & J Equipment Rentals Inc. Attn: Manager or Agent 226 Mary White Road Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,500.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112	Nonpriority creditor's name and mailing address J A M Transport Attn: Manager or Agent P.O. Box 3215 Florence, SC 29502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$900.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.113	Nonpriority creditor's name and mailing address Brent Jackson 206 McLamb Road Newton Grove, NC 28366 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,430.00
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3.114	Nonpriority creditor's name and mailing address JBM Transport, Inc. Attn: Manager or Agent 8849 Cypress Avenue Fontana, CA 92335 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,500.00
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3.115	Nonpriority creditor's name and mailing address Jerome Langdon Produce Attn: Manager or Agent 5855 Old Fairground Road Benson, NC 27504 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$352,349.79
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3.116	Nonpriority creditor's name and mailing address John Deere Financial Attn: Managing Agent PO Box 4450 Carol Stream, IL 60197-4450 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Parts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,841.84
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3.117	Nonpriority creditor's name and mailing address Jones Farms Attn: Manager or Agent 7094 Honeysuckle Lane Bailey, NC 27807 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,400.00
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3.118	Nonpriority creditor's name and mailing address Jones Motor Company, Inc. Attn: Manager or Agent 654 Enterprise Drive Limerick, PA 19468 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,869.00
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3.119	Nonpriority creditor's name and mailing address Jerry Jordan 11108 Jordan Road Raleigh, NC 27603 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,640.13
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3.120	Nonpriority creditor's name and mailing address Blake King Attn: Manager or Agent 722 Ozzie Road Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$11,740.86</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.121	Nonpriority creditor's name and mailing address Kornegay Family Farms, LLC Attn: Manager or Agent 610 Worley Road Princeton, NC 27569 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$46,022.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address Lane's Lawn Service Attn: Manager or Agent 1975 Pope Road Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,450.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address Roger Lane Attn: Manager or Agent P.O. Box 238 Turkey, NC 28393 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$27,011.33</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.124	Nonpriority creditor's name and mailing address Law Office of Donald K. Carrol Attn: Manager or Agent P.O. Drawer 1018 Oak Grove, LA 71263 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,852.10</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.125	Nonpriority creditor's name and mailing address Lawson Products, Inc. Attn: Managing Agent PO Box 809401 Chicago, IL 60680-9401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,587.66</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.126	Nonpriority creditor's name and mailing address Brian Lee 758-A Shaws Pond Road Four Oaks, NC 27524 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$15,928.76</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.127	Nonpriority creditor's name and mailing address Lipman - Texas, LLC Attn: Manager or Agent 11990 Shiloh Rd Dallas, TX 75228 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$200.00
3.128	Nonpriority creditor's name and mailing address Longship Attn: Manager or Agent 2741 Georgetown Road Lexington, KY 40511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$29,317.00
3.129	Nonpriority creditor's name and mailing address LTL Logistics Inc. Attn: Manager or Agent 30 Rue Des Galets Chateauguay QC J6K 0B4 Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$5,990.00
3.130	Nonpriority creditor's name and mailing address Maglio & Co. Attn: Manager or Agent 4287 N Port Washington Rd Milwaukee, WI 53212 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$375.00
3.131	Nonpriority creditor's name and mailing address Manis Custom Builders Inc. Attn: Manager or Agent 5880 Crestline Road Laurinburg, NC 28352 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$12,000.00
3.132	Nonpriority creditor's name and mailing address Mann Packing Co. Attn: Manager or Agent 1333 Schilling Place Salinas, CA 93901 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,600.00
3.133	Nonpriority creditor's name and mailing address Matron Transport LLC Attn: Manager or Agent 104 Willow Trace Stockbridge, GA 30281 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,250.00

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3.134 Nonpriority creditor's name and mailing address McArthur Hardware Attn: Manager or Agent 117 E. Railroad Avenue Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,283.71
3.135 Nonpriority creditor's name and mailing address McCarron & Diess Attn: Manager or Agent 4530 Wisconsin Avenue NW Suite 310 Washington, DC 20016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,152.73
3.136 Nonpriority creditor's name and mailing address McKenzie Supply Company Attn: Manager or Agent P.O. Box 890470 Charlotte, NC 28289 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,718.29
3.137 Nonpriority creditor's name and mailing address Medallion Transport & Logistic Attn: Manager or Agent 701 East Gate Drive, Ste. 302 Mount Laurel, NJ 08054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,584.10
3.138 Nonpriority creditor's name and mailing address MidAmerica Freight Handlers Attn: Manager or Agent 900 South Highway Dr. Suite 202 Fenton, MO 63026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,604.00
3.139 Nonpriority creditor's name and mailing address Midwest Food Bank Attn: Manager or Agent 220 Parkade Ct Peachtree City, GA 30269 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.140 Nonpriority creditor's name and mailing address Millstream Farms Attn: Manager or Agent 1131 Timothy Road Dunn, NC 28334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$991,084.28

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3.141	Nonpriority creditor's name and mailing address MJE Brokerage, Inc. Attn: Mgr, Agent or Officer P.O. Box 65 Proctorville, NC 28375 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$39,462.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.142	Nonpriority creditor's name and mailing address N.C State University Attn: Manager or Agent 100 Derieux Place Raleigh, NC 27695-7211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$150.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.143	Nonpriority creditor's name and mailing address N.L. Daughtry Fertilizer Co. Attn: Manager or Agent 621 Lisbon Street Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,167.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Land & Building</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.144	Nonpriority creditor's name and mailing address National Logistics Service Attn.: Manager or Agent 7611 Cheviot Road #105 Cincinnati, OH 45247 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$103,005.44</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.145	Nonpriority creditor's name and mailing address Navajo Express, Inc. Attn: Manager or Agent 1400 W. 64th Street Denver, CO 80221 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$12,372.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.146	Nonpriority creditor's name and mailing address Navitas Credit Corp Attn: Manager, Agent, Officer 111 Executive Center Dr, Ste 1 Columbia, SC 29210 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$478.48</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.147	Nonpriority creditor's name and mailing address NC Strawberry Festival Attn: Manager or Agent P.O. Box 352 Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$700.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.148	Nonpriority creditor's name and mailing address Nealy, Mary Margaret Wooten 113 West Oliver Sttreet Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$14,366.99</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.149	Nonpriority creditor's name and mailing address Newsong Ministries Attn: Manager or Agent 825 Smith Road Ball Ground, GA 30107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$25,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.150	Nonpriority creditor's name and mailing address Nickey Gregory Co., Inc. Attn: Manager or Agent 16 Forest Pkwy Building N Forest Park, GA 30297 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,300.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.151	Nonpriority creditor's name and mailing address NPC Attn: Manager or Agent 555 Republic Drive Suite 302 Plano, TX 75074 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.152	Nonpriority creditor's name and mailing address O'Reilly Auto Parts Attn: Manager or Agent P.O. Box 1156 Springfield, MO 65801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$644.84</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.153	Nonpriority creditor's name and mailing address Olan Dunn Farms Attn: Manager or Agent 4159 US 301N Dunn, NC 28334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$9,000.13</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.154	Nonpriority creditor's name and mailing address OSI Restaurant Partners LLC Attn: Manager or Agent 2202 N West Shore Blvd. Tampa, FL 33607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,500.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.155	Nonpriority creditor's name and mailing address Sidney Page, Jr. P.O. Box 433 Cades, SC 29518 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,000.00
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3.156	Nonpriority creditor's name and mailing address Palmetto Enterprise Attn: Manager or Agent 4247 Planter Road Effingham, SC 29541 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$700.00
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3.157	Nonpriority creditor's name and mailing address Palmetto Packaging & Paper Attn: Manager or Agent P.O. Box 2758 Greenville, SC 29602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,861.85
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3.158	Nonpriority creditor's name and mailing address Pembroke Waste Attn: Manager or Agent P.O. Box 2400 Pembroke, NC 28372 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,704.40
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3.159	Nonpriority creditor's name and mailing address Pickles + Transport LLC Attn: Manager or Agent 3010 Fletcher Avenue Lakeland, FL 33803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,396.00
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3.160	Nonpriority creditor's name and mailing address Piedmont Belting Company Attn: Manager or Agent 1271 South Park Drive Kernersville, NC 27284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,414.51
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3.161	Nonpriority creditor's name and mailing address Pinna, Johnston & Burwell Attn: Bill Pinna 2601 Oberlin Rd. Raleigh, NC 27608 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74,050.64
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3.162	Nonpriority creditor's name and mailing address Pinnacle Freight Systems Attn: Manager or Agent 500 Cedar Lane, Bldg 1 Florence, NJ 08518 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.163	Nonpriority creditor's name and mailing address Pitney Bowes Purchase Power Attn: Manager or Agent P.O. Box 371887 Pittsburgh, PA 15250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$595.67</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Postage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.164	Nonpriority creditor's name and mailing address Polymer Logistics, LLC Attn: Manager or Agent P.O. Box 847238 Los Angeles, CA 90084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$9,216.13</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	Nonpriority creditor's name and mailing address Jimmy Powers 711 Barker Church Road Lumberton, NC 28358 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$63,940.86</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.166	Nonpriority creditor's name and mailing address Primus Auditing Operations Attn: Manager or Agent P.O. Box 5785 Santa Maria, CA 93456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$8,585.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.167	Nonpriority creditor's name and mailing address Progressive Sales & Marketing Attn: Manager or Agent 400 Technology Court Ste. A Pembroke Pines, FL 33082 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,912.76</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.168	Nonpriority creditor's name and mailing address PS Connection Attn: Manager or Agent P.O. Box 416 Center, CO 81125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$12,990.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.169	Nonpriority creditor's name and mailing address PT Brokers Attn: Manager or Agent 201 E. Sunflower Road, Suite 1 Cleveland, MS 38732 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$19,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.170	Nonpriority creditor's name and mailing address PVI Enterprises Attn: Managing Agent 13603 Swamp Fox Hwy, East Tabor City, NC 28463 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,541.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.171	Nonpriority creditor's name and mailing address R & B Freight Transportation LLC Attn: Manager or Agent 2727 Sky View Drive Lithia Springs, GA 30122 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,955.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.172	Nonpriority creditor's name and mailing address Rainbow Logistics, LLC Attn: Manager or Agent 251 West Covington Avenue Attalla, AL 35954 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,542.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.173	Nonpriority creditor's name and mailing address Rankin Truck Brokers Attn: Manager or Agent 159 Point South Drive Yemassee, SC 29945 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,048.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.174	Nonpriority creditor's name and mailing address Rapid Capital Finance Attn: Mgr, Officer or Agent 11900 Biscayne Blvd., Ste. 201 Miami, FL 33181 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$152,087.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.175	Nonpriority creditor's name and mailing address Raylan Freight services Attn: Manager or Agent 143 N. Kalamazoo Street Vicksburg, MI 49097 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,936.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.176	Nonpriority creditor's name and mailing address Real Time Freight Services Attn: Manager or Agent P.O. Box 99 New Plymouth, ID 83655 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$900.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.177	Nonpriority creditor's name and mailing address RFG Logistics Attn: Manager or Agent 5820 SO 142nd Street Omaha, NE 68137 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$10,200.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.178	Nonpriority creditor's name and mailing address Rightway Brokerage LLC Attn: Manager or Agent 1812 S. Hamilton Street Dalton, GA 30720 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$6,002.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.179	Nonpriority creditor's name and mailing address RJ Cargo Express, Inc. Attn: Manager or Agent 11117 W. Okeechobee Rd. Ste. 109 Hialeah, FL 33018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.180	Nonpriority creditor's name and mailing address Roadrunner Transportation Attn: Manager or Agent P.O. Box 8903 Cudahy, WI 53100 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$25,631.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.181	Nonpriority creditor's name and mailing address Robinson & Son Machine, Inc. Attn: Manager or Agent P.O. Box 2337 Clinton, NC 28329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,838.69</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.182	Nonpriority creditor's name and mailing address Romark Transportation, Inc. Attn: Manager or Agent 340 Worley Road Canton, GA 30114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,177.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.183	Nonpriority creditor's name and mailing address S & S Forwarding Inc. Attn: Manager or Agent 1975 Hymus Blvd, Ste 250 Dorved, QC H9P 158 Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,610.00
3.184	Nonpriority creditor's name and mailing address Safety Kleen Attn: Manager or Agent 934 N 5th Street Saint Pauls, NC 28384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$170.80
3.185	Nonpriority creditor's name and mailing address Salinas Trucking Attn: Manager or Agent 206 Walnut Lane Bossier City, LA 71111 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,084.00
3.186	Nonpriority creditor's name and mailing address Sampson Building Supply Attn: Manager or Agent P.O. Box 526 Clinton, NC 28329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,708.94
3.187	Nonpriority creditor's name and mailing address Savoie, Inc. Attn: Manager or Agent 2920 Route 218 Manseau, QC GOX1VO Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$134,277.00
3.188	Nonpriority creditor's name and mailing address Schuman, Paula P.O. Box 63 Spencerville, MD 20868 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55,000.00
3.189	Nonpriority creditor's name and mailing address Scotlynn Commodities Inc. Attn: Manager or Agent 1150 Vittoria Road Vittoria, Ontario NOE1WO Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,582.00

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3.190	Nonpriority creditor's name and mailing address Scott Farms Inc. Attn: Manager or Agent 7965 A Simpson Road Lucama, NC 27851 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$147,452.00
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3.191	Nonpriority creditor's name and mailing address Scott Martin Transport, LLC Attn: Manager or Agent 2440 Vineyard Circle Sanford, FL 32771 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,464.00
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3.192	Nonpriority creditor's name and mailing address Sensitech, Inc. Attn: Manager or Agent P.O. Box 74200 Los Angeles, CA 90074-2000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$501.73
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3.193	Nonpriority creditor's name and mailing address Simba Trucking, Inc. Attn: Manager or Agent 217 Malloy Lane Blacklick, OH 43004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
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3.194	Nonpriority creditor's name and mailing address Singletary Small Engine Attn: Manager or Agent 9511 James B. White Hwy., S. Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.12
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3.195	Nonpriority creditor's name and mailing address Smith Farms Attn: Manager or Agent 9690 Lisbon Road Clarkton, NC 28433 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.00
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3.196	Nonpriority creditor's name and mailing address Smith Int'l Truck Ctr Attn: Managing Agent P.O. Box 20067 Fayetteville, NC 28312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$103.60
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3.197	Nonpriority creditor's name and mailing address Tyrae Edward Smith Attn: Manager or Agent 9770 Lisbon Road Clarkton, NC 28433 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$13,750.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.198	Nonpriority creditor's name and mailing address Jimmy Soles 7754 Rough & Ready Road Chadbourne, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$3,016.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.199	Nonpriority creditor's name and mailing address Southern Mark Industries LLC Attn: Manager or Agent P.O. Box 1780 Vidalia, GA 30475 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$5,813.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.200	Nonpriority creditor's name and mailing address Southern Produce Dist. Inc. Attn: Manager or Agent P.O. Box 130 Faison, NC 28341 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$305,622.75</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.201	Nonpriority creditor's name and mailing address Southern Roots Attn: Manager or Agent P.O. Box 130 Chadbourne, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,870,411.08</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.202	Nonpriority creditor's name and mailing address SP Funding, LLC Attn: Manager or Agent 100 Elks Club Road Brevard, NC 28712 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$1,052,930.07</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.203	Nonpriority creditor's name and mailing address Spring Acres Attn: Manager or Agent 1280 Macedonia Road Spring Hope, NC 27882 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$112,605.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.204	Nonpriority creditor's name and mailing address ST Freight LLC Attn: Manager or Agent P.O. Box 1147 Manitowoc, WI 54221 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$237,338.90
3.205	Nonpriority creditor's name and mailing address Stevens & Hasty Company, Inc. Attn: Manager or Agent 128 Pecan Street Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$568.90
3.206	Nonpriority creditor's name and mailing address Strickland Pallets Attn: Manager or Agent 10516 Greenpath Road Dunn, NC 28334 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,300.00
3.207	Nonpriority creditor's name and mailing address Earl Sullivan 8444 St. Mary's Church Road Lucama, NC 27851 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$416,888.00
3.208	Nonpriority creditor's name and mailing address Sunteck Transport Co Inc. Attn: Manager or Agent 6413 Congress Avenue, Suite 26 Boca Raton, FL 33487 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,400.00
3.209	Nonpriority creditor's name and mailing address T&C's Services, Inc. Attn: Manager or Agent 6112 Old Lake Road Bolton, NC 28423 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,290.00
3.210	Nonpriority creditor's name and mailing address Tennant Sales & Service Co. Attn: Manager or Agent P.O. Box 71414 Chicago, IL 60694 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$957.55

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3.211	Nonpriority creditor's name and mailing address Tharrington Smith LLP Attn: Manager or Agent 209 Fayetteville Street Raleigh, NC 27602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,282.15 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.212	Nonpriority creditor's name and mailing address The Door Man, Inc. Attn: Manager or Agent P.O. Box 3837 Lumberton, NC 28359 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,787.35 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.213	Nonpriority creditor's name and mailing address The NY Produce Show & Conf. Attn: Manager or Agent P.O. Box 810425 Boca Raton, FL 33481 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,999.50 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.214	Nonpriority creditor's name and mailing address The Produce News Attn: Manager or Agent 482 Hudson Terrace Englewood Cliffs, NJ 07632 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.215	Nonpriority creditor's name and mailing address Thompson Price & Co. Attn: Manager or Agent P.O. Box 398 Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$201,335.51 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.216	Nonpriority creditor's name and mailing address Tifco Industries, Inc. Attn: Manager or Agent P.O. Box 40277 Houston, TX 77240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$727.91 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.217	Nonpriority creditor's name and mailing address Time Warner Cable Attn: Manager or Agent PO Box 583471 Charlotte, NC 28258 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,241.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor <u>WAYNE BAILEY, INC.</u>		Case number (if known) <u>18-00284-5-SWH</u>
Name		

3.218	Nonpriority creditor's name and mailing address Tire Barn Inc. Attn: Manager or Agent P.O. Box 427 Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$284.12</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.219	Nonpriority creditor's name and mailing address Total Quality Logistics, LLC Attn: Manager or Agent P.O. Box 799 Milford, OH 45150 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$57,583.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.220	Nonpriority creditor's name and mailing address Town of Chadbourn Attn: Manager or Agent Chadbourn, NC 28431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$8,292.91</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.221	Nonpriority creditor's name and mailing address Trinity Fresh Foods Attn: Manager or Agent 2281 Turkey Highway Clinton, NC 28328 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$70,850.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.222	Nonpriority creditor's name and mailing address Trinity Frozen Foods Attn: Manager or Agent P.O. Box 3207 Pembroke, NC 28372 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$174.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.223	Nonpriority creditor's name and mailing address Tull Hill Farms, Inc. Attn: Manager or Agent 2264 Hugo Road Kinston, NC 28501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,414,506.34</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.224	Nonpriority creditor's name and mailing address Tull Hill Farms, Inc. Attn: Manager or Agent 2264 Hugo Road Kinston, NC 28501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$586,526.71</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>2016</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor WAYNE BAILEY, INC.
NameCase number (if known) 18-00284-5-SWH

3.225	Nonpriority creditor's name and mailing address Andrew Tyson 985 Evans Road Nashville, NC 27856 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,600.00
3.226	Nonpriority creditor's name and mailing address Uline Attn: Manager or Agent 2200 S. Lakeside Dr Waukegan, IL 60085 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104.26
3.227	Nonpriority creditor's name and mailing address Unifirst Corp. Attn: Manager or Agent 1821 Dawson Street Wilmington, NC 28403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.00
3.228	Nonpriority creditor's name and mailing address United Rentals Attn: Manager or Agent P.O. Box 100711 Atlanta, GA 30384-0711 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,848.43
3.229	Nonpriority creditor's name and mailing address Universal Truckload, Inc. Attn: Manager or Agent 12755 East Nince Mile Rd. Warren, MI 48089 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,300.00
3.230	Nonpriority creditor's name and mailing address US Logistics, LLC Attn: Manager or Agent P.O. Box 14309 Cincinnati, OH 45250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
3.231	Nonpriority creditor's name and mailing address Vaughn Belting Company, Inc. Attn: Manager or Agent P.O. Box 5505 Spartanburg, SC 29304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,127.07

Debtor <u>WAYNE BAILEY, INC.</u>		Case number (if known) <u>18-00284-5-SWH</u>
Name		

3.232	Nonpriority creditor's name and mailing address Volm Bag Co., Inc. Attn: Manager or Agent P.O. Box 400 Antigo, WI 54409 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,854.71
<hr/>			
3.233	Nonpriority creditor's name and mailing address Wellman Oil & Propane Co Attn: Manager or Agent P.O. Box 780 Clinton, NC 28329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,444.98
<hr/>			
3.234	Nonpriority creditor's name and mailing address Werner Enterprises Inc. Attn: Manager or Agent 14507 Frontier Road Omaha, NE 68138 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,808.00
<hr/>			
3.235	Nonpriority creditor's name and mailing address White Falcon Solutions, Inc. Attn: Manager or Agent 223 South Golden State Blvd. Turlock, CA 95380 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,000.00
<hr/>			
3.236	Nonpriority creditor's name and mailing address Whiteville Forklift & Equip. Attn: Manager or Agent 344 Vinson Road Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,922.46
<hr/>			
3.237	Nonpriority creditor's name and mailing address Whiteville Janitorial Supply Attn: Manager or Agent 1940 S. Madison St. Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.16
<hr/>			
3.238	Nonpriority creditor's name and mailing address Williamson, Walton & Scott LLP Attn: Manager or Agent 136 Washington Street Whiteville, NC 28472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,895.50

Debtor WAYNE BAILEY, INC.
NameCase number (if known) 18-00284-5-SWH

3.239	Nonpriority creditor's name and mailing address Willson International Limited Attn: Manager or Agent 2345 Argentia Road Suite 201 Mississauga, Ontario L5N 8KA Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,957.54
3.240	Nonpriority creditor's name and mailing address J. Roland Wood 2500 Beasley Road Benson, NC 27504 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,377.90
3.241	Nonpriority creditor's name and mailing address Alice Wooten 160 Kissam Lane Evergreen, NC 28438 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.242	Nonpriority creditor's name and mailing address Wright Trans, Inc. Attn: Manager or Agent P.O. Box 4269 San Clemente, CA 92674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$468.00
3.243	Nonpriority creditor's name and mailing address Zep Manufacturing Attn: Manager or Agent PO Box 40462*9 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$991.47

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 93,842.64
5b. +	\$ 14,776,326.05
5c.	\$ 14,870,168.69

Fill in this information to identify the case:

Debtor name WAYNE BAILEY, INC.

United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISION

Case number (if known) 18-00284-5-SWH

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest Equipment lease

State the term remaining

List the contract number of any government contract

Alliance Funding Group, Inc.
Attn: Manager or Agent
3745 W. Chapman Avenue
Suite 200
Orange, CA 92868

2.2. State what the contract or lease is for and the nature of the debtor's interest Equipment lease

State the term remaining

List the contract number of any government contract

Ascentium Capital, LLC
Attn: Mgr., Officer or Agt.
23970 Hwy 59 N., 2nd Fl.
Kingwood, TX 77339-1535

2.3. State what the contract or lease is for and the nature of the debtor's interest Lease of forklift

State the term remaining

List the contract number of any government contract

Atlantic Coast Toyotalift
Attn: Manager or Agent
P.O. Box B
High Point, NC 27260

2.4. State what the contract or lease is for and the nature of the debtor's interest Equipment lease

State the term remaining

List the contract number of any government contract

Axis Capital, Inc.
Attn: Manager or Agent
308 N. Locust St., Ste 100
Grand Island, NE 68801

Debtor 1 WAYNE BAILEY, INC.

First Name

Middle Name

Last Name

Case number (if known) 18-00284-5-SWH

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.5. State what the contract or lease is for and the nature of the debtor's interest Equipment Lease

State the term remaining

List the contract number of any government contract

Bank of the West
Attn: Manager or Agent
475 Sansome Street
19th Floor
San Francisco, CA 94111-3112

2.6. State what the contract or lease is for and the nature of the debtor's interest Equipment lease

State the term remaining

List the contract number of any government contract

BB&T Commercial Equip.Cap.
Attn: Mgr., Agt. or Officer
2 Great Valley Parkway, Suite
Malvern, PA 19355

2.7. State what the contract or lease is for and the nature of the debtor's interest Capital Lease
\$300,000

State the term remaining

List the contract number of any government contract

Edwards Brothers Prop. LLC
Attn: Manager or Agent
305 E. Oliver Street
Whiteville, NC 28472

2.8. State what the contract or lease is for and the nature of the debtor's interest Equipment lease

State the term remaining

List the contract number of any government contract

Financial Pacific Leasing
Attn: Mgr, Agt or Officer
3455 S. 344th Way #300
Federal Way, WA 98001-9546

2.9. State what the contract or lease is for and the nature of the debtor's interest Lease of 2014 Ford Transit Conn Van, VIN# 39190

State the term remaining

List the contract number of any government contract

Ford Credit
Attn: Manager or Agent
PO Box 105697
Atlanta, GA 30348

2.10. State what the contract or lease is for and the nature of the debtor's interest Bin lease

State the term remaining

List the contract number of any

Gore & Assoc. Management
Attn: Manager or Agent
PO Box 2001
Whiteville, NC 28472

Debtor 1 WAYNE BAILEY, INC.

First Name

Middle Name

Last Name

Case number (if known) 18-00284-5-SWH

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

government contract

2.11. State what the contract or lease is for and the nature of the debtor's interest Capital Lease of #2 Draw Refrigeration \$131,279.89

State the term remaining

List the contract number of any government contract

Huntington Technology Finance
Attn: Manager or Agent
P.O. Box 2017
Bloomfield Hills, MI 48303

2.12. State what the contract or lease is for and the nature of the debtor's interest Lease of Kerian Sizer \$22,481.29

State the term remaining

List the contract number of any government contract

M2 Funding
Attn: Manager or Agent
175 N. Patrick Blvd, Ste. 140
Brookfield, WI 53045

2.13. State what the contract or lease is for and the nature of the debtor's interest Bin lease

State the term remaining

List the contract number of any government contract

Millstream Farms
Attn: Manager or Agent
1131 Timothy Road
Dunn, NC 28334

2.14. State what the contract or lease is for and the nature of the debtor's interest Acct# Land & Building

State the term remaining

List the contract number of any government contract

N.L. Daughtry Fertilizer Co.
Attn: Manager or Agent
621 Lisbon Street
Clinton, NC 28328

2.15. State what the contract or lease is for and the nature of the debtor's interest Bin lease

State the term remaining

List the contract number of any government contract

Pawnee Leasing Corporation
Attn: Manager or Agent
700 Centre Avenue
Fort Collins, CO 80526

2.16. State what the contract or lease is for and the nature of the debtor's interest Capital Lease of 1st drawer Refrigeration \$220,919.46

PNC Equipment Finance
Attn: Managing Agent
655 Business Center Drive
Horsham, PA 19044

Debtor 1 WAYNE BAILEY, INC.

First Name

Middle Name

Last Name

Case number (if known) 18-00284-5-SWH

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

State the term remaining

List the contract number of any government contract _____

- 2.17. State what the contract or lease is for and the nature of the debtor's interest Equipment lease

State the term remaining

List the contract number of any government contract _____

Susquehanna Commercial Finance
Attn: Manager, Agent, Officer
2 Country View
Malvern, PA 19355

- 2.18. State what the contract or lease is for and the nature of the debtor's interest Forklift lease

State the term remaining

List the contract number of any government contract _____

Toyota Motor Credit
Attn: Manager or Agent
PO Box 2431
Carol Stream, IL 60132

- 2.19. State what the contract or lease is for and the nature of the debtor's interest ADT Security Services

State the term remaining

List the contract number of any government contract _____

Tyco Integrated Security, LLC
Attn: Manager or Agent
P.O. Box 96041
Charlotte, NC 28296-0041

- 2.20. State what the contract or lease is for and the nature of the debtor's interest 2017 Tennant Sweeper Model #S30

State the term remaining

List the contract number of any government contract _____

Wells Fargo Vendor Financial
Attn: Mgr, Officer or Agent
P.O. Box 35701
Billings, MT 59107

- 2.21. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Wooten Land & Timber, L.L.C.
Attn: Manager or Agent
P.O. Box 467
Chadbourn, NC 28431

Debtor 1 WAYNE BAILEY, INC.

First Name

Middle Name

Last Name

Case number (if known) 18-00284-5-SWH

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.22. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Wooten's Business Equipment
Leasing, LLC
Attn: Manager or Agent
P.O. Box 467
Chadbourn, NC 28431

2.23. State what the contract or lease is for and the nature of the debtor's interest Lease of land and building

State the term remaining

List the contract number of any government contract

Alice Wooten
160 Kissam Lane
Evergreen, NC 28438

Fill in this information to identify the case:

Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON
DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filingOfficial Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 Alice Wooten	160 Kissam Lane Evergreen, NC 28438	Branch Banking & Trust	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 Alice Wooten	160 Kissam Lane Evergreen, NC 28438	Cape Fear Farm Credit	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3 Alice Wooten	160 Kissam Lane Evergreen, NC 28438	CFG Financial Services, LLC	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4 Alice Wooten	160 Kissam Lane Evergreen, NC 28438	Millstream Farms	<input checked="" type="checkbox"/> D <u>2.10</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.5 George G. Wooten	160 Kissam Lane Evergreen, NC 28438	Branch Banking & Trust	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

Additional Page to List More Codebtors**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor

Column 2: Creditor

2.6	George G. Wooten	160 Kissam Lane Evergreen, NC 28438	Cape Fear Farm Credit	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	George G. Wooten	160 Kissam Lane Evergreen, NC 28438	CFG Financial Services, LLC	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	George G. Wooten	160 Kissam Lane Evergreen, NC 28438	Millstream Farms	<input checked="" type="checkbox"/> D <u>2.10</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.9	Texas Sweet Potato Dist. LLC	P.O. Box 467 Chadbourn, NC 28431	CFG Financial Services, LLC	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.10	Wooten Land & Timber, L.L.C.	Attn: Manager or Agent P.O. Box 467 Chadbourn, NC 28431	Cape Fear Farm Credit	<input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.11	Wooten Land & Timber, L.L.C.	Attn: Manager or Agent P.O. Box 467 Chadbourn, NC 28431	CFG Financial Services, LLC	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.12	Wooten Land & Timber, L.L.C.	Attn: Manager or Agent P.O. Box 467 Chadbourn, NC 28431	Millstream Farms	<input checked="" type="checkbox"/> D <u>2.10</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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Fill in this information to identify the case:Debtor name WAYNE BAILEY, INC.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA - WILMINGTON DIVISIONCase number (if known) 18-00284-5-SWH☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year**From the beginning of the fiscal year to filing date:
From 1/01/2018 to Filing Date**Sources of revenue**
Check all that apply☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)\$1,904,685.00For prior year:
From 1/01/2017 to 12/31/2017☒ Operating a business☐ Other _____\$36,957,798.00For year before that:
From 1/01/2016 to 12/31/2016☒ Operating a business☐ Other _____\$43,015,522.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**
From 1/01/2018 to Filing DateTrinity Frozen Foods, LLC
interest payment\$38,250.00**For prior year:**
From 1/01/2017 to 12/31/2017Trinity Frozen Foods interest
payment\$33,750.00**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. See attached Exhibit E		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See attached Exhibit F		\$0.00	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.			<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.2.	The Foreclosure of the Deed of Trust executed by George G. Wooten, Jr. and wife, Alice K. Wooten, Wayne Bailey, Inc., fka as W.E. Bailey & Son, Inc., and Wooten Land & Timber, LLC, recorded in Deed of Trust Book 1094, Page 639, as modified in Book 1147, Page 252, Columbus County Registry 17 SP 151	Foreclosure	Columbus County Superior Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	The Foreclosure of the Deed of Trust executed by Wooten Land & Timber, L.L.C., Wayne Bailey, Inc., fka as W.E. Bailey & Son, Inc., and Wayne Bailey, Inc., as successor by merger to Pride of Sampson, Inc., recorded in Deed of Trust Book 1023, Page 1, Columbus County Registry 17 SP 152	Foreclosure	Columbus County Superior Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	The Simultaneous Foreclosure of the Deed of Trust executed by Wooten Land & Timber, L.L.C., Wayne Bailey, Inc., fka as W.E. Bailey & Son, Inc., and Wayne Bailey, Inc. as successor by merger to Pride of Sampson, Inc., recorded in Deed of Trust Book 1071, Page 897, as modified in Book 1147, Page 236, Columbus County Registry, and the Deed of Trust executed by George G. Wooten, Jr., Alice K. Wooten, Wayne Bailey, Inc. fka W.E. Bailey & Son, Inc., and Wooten Land and Timber L.L.C. in Book 1094, Page 17 SP 150	Foreclosure	Columbus County Superior Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5.	The Foreclosure of the Deed of Trust executed by Pride of Sampson, Inc. now known as Wayne Bailey, Inc., recorded in Book 1638, Page 533, Sampson County Registry, as modified in Book 1965, page 1 17 SP 148	Foreclosure	Sampson County Superior Court	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions

Debtor WAYNE BAILEY, INC.Case number (if known) 18-00284-5-SWH

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Cerro Gordo Baptist Church			\$1,668.75
Recipients relationship to debtor			
9.2. Ribbon Riders			\$2,500.00
Recipients relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
Debtor's vehicle struck a horse in North Carolina	\$21,054.00	11/3/2017	\$0.00
Debtor's vehicle collided with another in North Carolina	\$0.00	5/11/2017	\$0.00
Debtor's vehicle collided with another in Florida	\$55,642.69	3/12/2017	\$0.00

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Stubbs & Perdue, P.A. 310 Craven Street PO Box 1654 New Bern, NC 28563-1654		January 19, 2018 See additional information in Attorney's Affidavit	\$44,000.00
Email or website address			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Vette Investments, LLC 22336 John Gamble Road Cornelius, NC 28031	Approximatley 37.8 acres in Clinton, North Carolina PIN 12065068005, 12065062001, 12065068006, 12088272003	November 20, 2017	\$620,000.00
Relationship to debtor 3rd party			

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
☒ Yes. Does the debtor serve as plan administrator?

☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

Wayne Bailey Inc. 401k Plan

Employer identification number of the plan

EIN: 831020

Has the plan been terminated?

- ☒ No
☐ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
 Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	PNC	XXXX-1979	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	December 2017	\$0.00
18.2.	SunTrust Bank Wilmington	XXXX-5592	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	11/1/2017	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Mannis Custom Builders, Inc. 5880 Crestline Road Laurinburg, NC 28352	Kathy Mannis	6,858 18bu equivalent bins of #1 sweet potatoes 1,854 18bu equivalent bins of cantors	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Crop Production Services P.O. Box 457 Clinton, NC 28329	Roger Lane	446 - 38 bushel bins of sweet potatoes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
See attached Exhibit G			\$0.00

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

25.1. Texas Sweet Potato
Distributing, LLC
P.O. Box 467
Chadbourn, NC 28431

EIN: 45-1262670

From-To December 30, 2010 to present

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address

Date of service

From-To

26a.1. Thompson Price & Co.
Attn: Manager or Agent
P.O. Box 398
Whiteville, NC 28472

20 years

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address

Date of service

From-To

26b.1. Thompson Price & Co.
Attn: Manager or Agent
P.O. Box 398
Whiteville, NC 28472

Audit dated August
22, 2017
Audit dated
December 31, 2016

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☒ None

Name and address

If any books of account and records are unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

- ☐ None

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

Name and address

26d.1. CFG Financial Services, LLC
Attn: Mgr, Agent or Officer
100 Elks Club Road
Brevard, NC 28712

26d.2. Cape Fear Farm Credit
Attn: Mgr, Officer or Agent
P.O. Box 2405
Fayetteville, NC 28302

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Donnie Griffin	1/7/2018	\$2,685,020.77

Name and address of the person who has possession of inventory records

Debtor

27.2	Donnie Griffin	10/29/2017	\$2,269,528.34
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Name and address of the person who has possession of inventory records

Debtor

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
George G. Wooten	160 Kissam Lane Evergreen, NC 28438	President, Director, Shareholder	70.28% shareholder

Name	Address	Position and nature of any interest	% of interest, if any
Wooten, George III	P.O. Box 130 Chadbourn, NC 28431	Vice President	

Name	Address	Position and nature of any interest	% of interest, if any
Wooten, Adam	P.O. Box 130 Chadbourn, NC 28431	Secretary-Treasurer	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?☐ No☒ Yes. Identify below.

Debtor WAYNE BAILEY, INC.

Case number (if known) 18-00284-5-SWH

Name	Address	Position and nature of any interest	Period during which position or interest was held
Wooten, Adam	P.O. Box 130 Chadbourn, NC 28431	Shareholder	transferred stock to sisters in 2016
Name	Address	Position and nature of any interest	Period during which position or interest was held
Wooten, George III	P.O. Box 130 Chadbourn, NC 28431	Shareholder	transferred stock to sisters in 2016

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 See attached Exhibit F			
Relationship to debtor			

31. **Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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32. **Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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EXHIBIT E

Payments to creditors
10/23/17 - 1/21/18

Vendor	Amount
1st Class Transportation LLC Total	\$7,606.00
941 ELECTRONIC TRANSFER Total	\$196,326.24
Alliance Funding Group, Inc. Total	\$19,786.47
American Express Total	\$38,520.93
Amur Equipment Finance Total	\$9,956.42
ARGO Investments of Columbus Inc Total	\$17,875.00
Ascentium Capital LLC Total	\$15,655.55
Atlantic Coast Toyotalift Total	\$6,932.93
Atlantic Corporation Total	\$62,470.52
Bailey/R Lane Total	\$103,104.64
Bank of the West Total	\$51,405.36
Bautista Farms Trucking LLC Total	\$17,990.00
BB&T Commercial Equipment Capital Total	\$12,259.21
Beckham Logistics Total	\$30,789.00
Black's Tire Service Total	\$6,475.07
BlueCross BlueShield of NC Total	\$116,447.75
C & T Bright Trucking Total	\$6,614.00
Cape Fear Farm Credit ACA Total	\$24,000.00
Cape Fear Propane Total	\$11,226.99
Carolina Financial Securities, LLC Total	\$700,000.00
Carolinas Staffing Solutions, Inc Total	\$17,313.56
Castellini Company Total	\$31,082.25
Catalina Galaviz Total	\$103,090.37
Cessco Inc. Total	\$7,876.65
Choptank Transport, Inc. Total	\$6,786.00
Coastal Group Corporation, Inc. Total	\$656,126.95
Connecting Point Total	\$26,030.29
Cowan Systems LLC Total	\$9,275.00
CV Pilson Total	\$7,500.00
Darden Restaurants Inc Total	\$11,026.25
Diaston Transport, LLC Total	\$9,954.00
Dixon Farm Total	\$15,000.00
Doris Jenkins Total	\$47,162.50
Duke Energy Progress (Clinton) Total	\$8,459.53
Duke Energy Progress Total	\$79,484.06
Durand-Wayland Inc. Total	\$22,549.67
Earl Sullivan Total	\$15,000.00
Emily Stephens Total	\$9,279.00
England Logistics Inc Total	\$11,468.00
Faustino Campos Total	\$77,807.76
First Star Logistics LLC Total	\$28,438.08
George Wooten III Total	\$20,299.65
Giro-Pack Inc. Total	\$50,713.26
Gore & Associates Management Total	\$30,882.93
Gream Trucking Inc. Total	\$6,529.60
Hagan Electronics Inc. Total	\$25,726.64
Harden Farms Inc Total	\$12,500.00
Harvey's Southeast-Whiteville Total	\$37,320.00
Hendren & Malone PLLC Total	\$52,759.00
Holiday Motel Total	\$12,650.00
Industrial Power, Inc Total	\$36,152.48
Integrity Express Logistics, LLC Total	\$20,525.00
International Paper Total	\$450,667.48
Ja-Co Transport Services Total	\$11,681.71

Payments to Creditors
10/23/17 - 1/21/18

Vendor	Amount
Jerome Langdon Produce Total	\$10,000.00
Jerry Jordan Total	\$10,000.00
Jerry Turner Total	\$19,680.00
Jose Gracia Harvesting, Inc. Total	\$265,575.90
Liberty Food Marketers Co. Total	\$8,628.10
Little E Trucking Total	\$13,498.00
Longship Total	\$52,328.00
M2 Lease Funds LLC Total	\$8,700.57
Maglio & Co Total	\$10,525.00
Matt Brown Total	\$10,000.00
McArthur Hardware Total	\$11,807.98
McKenzie Supply Company Total	\$8,904.81
Millstream Farms Total	\$186,580.00
Millstream Farms(Loan Account) Total	\$50,000.00
MJE Brokerage Inc. Total	\$177,996.00
Monroe Enzor Farms Total	\$27,716.75
N C Department of Revenue Total	\$32,841.56
Nationwide Agribusiness/Farmland Ins. Tot	\$40,184.80
Navajo Express, Inc Total	\$6,778.00
NewSong Ministries Total	\$7,075.00
Oliver Oil Company Total	\$55,289.78
PalletOne Total	\$7,264.13
Peggy Brooks Jenkins Total	\$11,212.50
Phoenix Management Service, LLC Total	\$35,695.72
PNC Equipment Finance Total	\$20,980.66
Polymer Logistics, LLC Total	\$9,200.95
Prudential Total	\$7,028.10
Rankin Truck Brokers Total	\$25,111.00
Rapid Capital Finance LLC Total	\$127,124.00
RFG Logistics Total	\$20,600.00
Right way Brokerage, LLC Total	\$8,000.00
Roger Lane Total	\$11,436.00
Ruben Serna Total	\$23,083.69
S P Funding LLC Total	\$50,000.00
Salinas Trucking Total	\$11,345.00
Savoie, Inc. Total	\$114,000.00
Scott Insurance Total	\$21,540.00
Sidney Page Jr Total	\$36,116.00
Small Pallets Company Total	\$38,008.00
Smith Farms Total	\$33,025.00
Southern Mark Industries LLC Total	\$8,141.25
Southern Produce Dist. Inc. Total	\$47,391.75
Southern Roots Total	\$266,861.90
Spring Acres Total	\$20,000.00
ST Freight LLC Total	\$30,652.00
State of Louisiana Dept. of Ag. & Forest Tot	\$6,724.87
The Door Man, Inc. Total	\$17,495.04
The Harford Total	\$12,462.77
Thompson Price & Co. Pa. Total	\$30,000.00
Thompsons Transfer Total	\$25,675.00
Total Quality Logistics, LLC Total	\$9,796.00
Town Of Chadbourn Total	\$67,903.73
Toyota Motor Credit Corporation Total	\$12,819.81
Transamerica Premier Life Total	\$20,500.00

Payments to creditors
10/23/17 - 1/21/18

Vendor	Amount
Tull Hill Farms - 2016 Total	\$10,250.00
Tull Hill Farms Inc Total	\$602,970.00
Tyrae Edward Smith Total	\$83,118.00
Universal Truckload, Inc. Total	\$8,686.00
Wellman Oil & Propane Co (Clinton) Total	\$7,764.05
Whiteville Forklift & Equipment , Inc. Total	\$7,878.15
Wooten Land & Timber LLC Total	\$21,398.09
Y&B Transport LLC Total	\$11,409.94
Grand Total	\$6,379,339.10

Payroll Summary

WAYNE BAILEY, INC

Ern/Ded Description	St	Ag	Total Hours	OT Hours	Dbl Hours	Places	OT Places	Dbl Places	Rate	Amount
WOOTEN JR, GEORGE			ID: 1010	SSN:		Days:		Weeks:		
Earnings										
Christmas Gift	NC	No								1,250.00
Vehicle usage	NC	No								1,175.00
Emplr Paid HC-I	NC	No								9,277.02
Salary	NC	No								256,560.00
			.00	.00	.00	0	0	0		268,262.02
Deductions										
SS Employee	NC	No								7,887.50
401K Loan	NC	No								8,338.95
Medicare Emp	NC	No								4,198.49
Garnish %	NC	No								25,656.00
Flex Spend Acct	NC	No								2,372.90
Ins After Tax	NC	No								1,859.28
Emplr Paid HC-I	NC	No								9,277.02
Veh.usage offsel	NC	No								1,147.39
125A	NC	No								1,350.24
FIT	NC	No								48,452.80
NC SIT	NC	No								12,826.00
										123,366.57
Total: WOOTEN JR, GEORGE										144,895.45
Total: Non-Ag Workers										144,895.45
Grand Total:										144,895.45

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
George G. Wooten Jr.			ID: 09597							
Paid Voucher										
	Feb 28, 2017	02282017	Feb 28, 2017	202916	Mar 01, 2017	Property-Millstream	Voucher			4,063.80
	Jun 28, 2017	06282017	Jun 28, 2017	208172	Jun 29, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Jun 28, 2017	06282017	Jun 28, 2017	208173	Jun 29, 2017	Property-Millstream	Voucher			4,063.80
	Oct 31, 2017	10312017	Oct 31, 2017	213478	Nov 01, 2017	Property-Millstream	Voucher			4,063.80
	Oct 31, 2017	10312017	Oct 31, 2017	213476	Nov 01, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Nov 28, 2017	11282017	Nov 28, 2017	214573	Nov 29, 2017	November 2017 Property	Voucher			4,063.80
	Nov 28, 2017	11282017	Nov 28, 2017	214572	Nov 29, 2017	November 2017 Bin Leas	Voucher			2,243.43
	Dec 26, 2017	12262017	Dec 26, 2017	215690	Dec 27, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Dec 26, 2017	12262017	Dec 26, 2017	215691	Dec 27, 2017	Property-Millstream	Voucher			4,063.80
	Jan 31, 2017	1312017	Jan 31, 2017	201877	Feb 01, 2017	Property-Millstream	Voucher			4,063.80
	Jan 31, 2017	1312017	Jan 31, 2017	201876	Feb 01, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Jan 31, 2017	1312017	Jan 31, 2017	201739	Feb 01, 2017	Land Rent	Voucher			10,000.00
	Feb 28, 2017	2282017	Feb 28, 2017	202914	Mar 01, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Mar 30, 2017	3302017	Mar 30, 2017	204189	Mar 31, 2017	Property-Millstream	Voucher			4,063.80
	Mar 30, 2017	3302017	Mar 30, 2017	204188	Mar 31, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Apr 27, 2017	4272017	Apr 27, 2017	205333	Apr 28, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Apr 27, 2017	4272017	Apr 27, 2017	205334	Apr 28, 2017	Property-Millstream	Voucher			4,063.80
	May 30, 2017	5302017	May 30, 2017	206841	May 31, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	May 30, 2017	5302017	May 30, 2017	206842	May 31, 2017	Property-Millstream	Voucher			4,063.80
	Jul 31, 2017	7312017	Jul 31, 2017	209477	Aug 01, 2017	Property-Millstream	Voucher			4,063.80
	Jul 31, 2017	7312017	Jul 31, 2017	209475	Aug 01, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Aug 29, 2017	8292017	Aug 29, 2017	210953	Aug 30, 2017	Property-Millstream	Voucher			4,063.80
	Aug 29, 2017	8292017	Aug 29, 2017	210952	Aug 30, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
	Sep 29, 2017	9292017	Sep 29, 2017	212186	Sep 30, 2017	Property-Millstream	Voucher			4,063.80
	Sep 29, 2017	9292017	Sep 29, 2017	212184	Sep 30, 2017	Bin Lease-Kendall Hill	Voucher			2,243.43
Total Gross:				85,686.76	Total Discount:	.00	Total Net:	85,686.76		85,686.76
Grand Totals:			Gross:	85,686.76	Discount:	.00	Net:	85,686.76		85,686.76

Payroll Summary

WAYNE BAILEY, INC

Ern/Ded Description	St	Ag	Total Hours	OT Hours	Dbl Hours	Pieces	OT Pieces	Dbl Pieces	Rate	Amount
WOOTEN, ALICE			ID: 1317		SSN:		Days:		Weeks:	
Earnings										
Christmas Gift	NC	No								750.00
Emplr Paid HC-E	NC	No								9,277.02
Salary	NC	No								16,059.96
			.00	.00	.00	0	0	0		26,086.98
Deductions										
Flex Spend Acct	NC	No								2,372.90
NC SIT	NC	No								275.00
SS Employee	NC	No								895.10
Emplr Paid HC-I	NC	No								9,277.02
FIT	NC	No								1,297.67
Medicare Emp	NC	No								209.34
										14,327.03
Total: WOOTEN, ALICE										11,759.95
Total: Non-Ag Workers										11,759.95
Grand Total:										11,759.95

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
Alice Wooten			ID: 09598							
Paid Voucher										
71499	Feb 02, 2017	02012017	Feb 01, 2017	201809	Feb 01, 2017	Rent on Green Building	Voucher			500.00
71814	Mar 01, 2017	030117	Mar 01, 2017	202926	Mar 01, 2017	Rent on Green Building	Voucher			500.00
72266	Apr 03, 2017	04.03.2017	Apr 03, 2017	204292	May 01, 2017	Rent on Green Building	Voucher			500.00
72674	May 01, 2017	05.01.2017	May 01, 2017	205486	May 01, 2017	Rent on Green Building	Voucher			500.00
73120	Jun 01, 2017	06012017	Jun 01, 2017	206968	Jun 01, 2017	Rent on Green Building	Voucher			500.00
73438	Jul 03, 2017	07012017	Jul 01, 2017	208330	Jul 01, 2017	Rent on Green Building	Voucher			500.00
89206	Mar 09, 2017	30917	Mar 09, 2017	203316	Apr 01, 2017	Monograming	Voucher			64.05
100047	Oct 16, 2017	08012017	Aug 01, 2017	209650	Aug 01, 2017	Rent on Green Building	Voucher			500.00
Total Gross:				3,564.05	Total Discount:		.00	Total Net:		3,564.05
Grand Totals:				Gross:	3,564.05	Discount:		.00	Net:	3,564.05

Payroll Summary

WAYNE BAILEY, INC

Ern/Ded Description	St	Ag	Total Hours	OT Hours	Dbl Hours	Pieces	OT Pieces	Dbl Pieces	Rate	Amount
WOOTEN, ADAM K			ID: 1012		SSN:		Days:		Weeks:	
Earnings										
Emplr Paid HC-t	NC	No								28,739.16
Salary	NC	No								112,000.20
Christmas Gift	NC	No								1,250.00
			.00	.00	.00	0	0	0		141,989.36
Deductions										
SS Employee	NC	No								6,983.38
Christmas Fund	NC	No								-375.00
Flex Spend Acct	NC	No								208.50
Medicare Emp	NC	No								1,833.20
401K	NC	No								3,380.00
125A	NC	No								406.64
Emplr Paid HC-t	NC	No								28,739.16
NC SIT	NC	No								5,615.00
FIT	NC	No								21,645.18
										68,236.06
Total: WOOTEN, ADAM K										73,753.30
Total: Non-Ag Workers										73,753.30
Grand Total:										73,753.30

Payroll Summary

WAYNE BAILEY, INC

Ern/Ded Description	St	Ag	Total Hours	OT Hours	Dbl Hours	Pieces	OT Pieces	Dbl Pieces	Rate	Amount
WOOTEN III, GEORGE G			ID: 1018		SSN:		Days:		Weeks:	
Earnings										
Emplr Paid HC-I	NC	No								28,739.16
Salary	NC	No								117,999.96
Christmas Gift	NC	No								1,250.00
			.00	.00	.00	0	0	0		147,989.12
Deductions										
Medicare Emp	NC	No								1,694.69
SS Employee	NC	No								7,246.29
FIT	NC	No								23,050.90
Flex Spend Acct	NC	No								2,374.40
NC SIT	NC	No								5,886.00
Christmas Fund	NC	No								-206.96
401K	NC	No								2,600.00
Emplr Paid HC-I	NC	No								28,739.16
										71,384.48
Total: WOOTEN III, GEORGE G										76,604.64
Total: Non-Ag Workers										76,604.64
Grand Total:										76,604.64

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
George Wooten III			ID: 09605							
Paid Voucher										
	Mar 07, 2017	121616	Dec 16, 2016	203140	Jan 15, 2017	BAL OF 2015 CROP	Voucher			80,000.00
	Jun 05, 2017	121616	Jun 05, 2017	207203	Jul 05, 2017	TRUCKS - Wired from Mr	Voucher			-75,629.00
	Jun 05, 2017	121616	Dec 16, 2016	200835	Jan 15, 2017	TRUCKS	Voucher			75,629.00
73054	May 26, 2017	52617	May 26, 2017	206756	Jun 25, 2017	PAYMENT	Voucher			61,600.00
89437	May 19, 2017	201890	May 19, 2017	206445	May 20, 2017	Tractor parts from Johnsc	Voucher			618.76
89440	May 25, 2017	5252017	May 25, 2017	206628	May 26, 2017	Repay for Bedder parts	Voucher			353.99
90205	Aug 02, 2017	203225	Aug 01, 2017	209645	Aug 02, 2017	Repairs on Equipment	Voucher			834.34
90317	Sep 06, 2017	9062017	Sep 06, 2017	211232	Oct 06, 2017	Repairs on Tractor	Voucher			450.00
90323	Sep 22, 2017	9222017	Sep 22, 2017	211914	Sep 23, 2017	Truck Parts	Voucher			384.98
90745	Dec 20, 2017	12202017	Dec 20, 2017	215534	Dec 21, 2017	Overpayment	Voucher			1,250.00
90750	Dec 28, 2017	12292017	Dec 29, 2017	215797	Dec 30, 2017	Mr. Enzor owed for Soybe	Voucher			14,457.00
100881	Jan 08, 2018	112217	Nov 22, 2017	214387	Dec 22, 2017	Land Rent - Hegepeth 80	Voucher			6,000.00
100881	Jan 08, 2018	121616	Dec 16, 2016	200836	Jan 15, 2017	BAL OF 2015 CROP	Voucher			70,422.70
100881	Jan 08, 2018	212589	Sep 14, 2017	214360	Oct 14, 2017	Labor - 2017	Voucher			-1,226.75
100881	Jan 08, 2018	212755	Sep 14, 2017	214361	Oct 14, 2017	Labor - 2017	Voucher			-37,259.93
100881	Jan 08, 2018	212909	Sep 14, 2017	214362	Oct 14, 2017	Labor - 2017	Voucher			-24,751.92
100881	Jan 08, 2018	212910	Sep 14, 2017	214363	Oct 14, 2017	Cuke Labor - 2017 Credit	Voucher			2,311.90
100881	Jan 08, 2018	213019	Sep 14, 2017	214364	Oct 14, 2017	Cuke Labor - 2017	Voucher			-41,129.87
100881	Jan 08, 2018	213020	Sep 14, 2017	214365	Oct 14, 2017	Labor - 2017	Voucher			-26,173.35
100881	Jan 08, 2018	213221	Sep 14, 2017	214366	Oct 14, 2017	Cuke Labor - 2017	Voucher			-15,014.46
100881	Jan 08, 2018	213222	Sep 14, 2017	214367	Oct 14, 2017	Labor - 2017	Voucher			-2,543.15
100881	Jan 08, 2018	213368	Sep 14, 2017	214368	Oct 14, 2017	Labor - 2017	Voucher			-21,820.03
100881	Jan 08, 2018	213369	Sep 14, 2017	214369	Oct 14, 2017	Cuke Labor - 2017	Voucher			-2,670.99
100881	Jan 08, 2018	213593	Sep 14, 2017	214370	Oct 14, 2017	Labor - 2017	Voucher			-1,964.49
100881	Jan 08, 2018	213789	Sep 14, 2017	214371	Oct 14, 2017	Labor - 2017	Voucher			-5,216.87
100881	Jan 08, 2018	213790	Sep 14, 2017	214372	Oct 14, 2017	Labor - 2017	Voucher			-12,211.26
100881	Jan 08, 2018	214032	Sep 14, 2017	214373	Oct 14, 2017	Labor - 2017	Voucher			-1,991.19
100881	Jan 08, 2018	214353	Sep 14, 2017	214374	Oct 14, 2017	Labor - 2017	Voucher			-2,160.34
100881	Jan 08, 2018	216489	Nov 29, 2017	214585	Dec 29, 2017	Land Rent - 2017	Voucher			-41,168.76
100881	Jan 08, 2018	51817	May 18, 2017	206352	Jun 17, 2017	T. HILL SEED PAID BY G	Voucher			179,000.00
100881	Jan 08, 2018	52617	May 26, 2017	206757	Jun 25, 2017	PAYMENT CK 73054	Voucher			-61,600.00
100881	Jan 08, 2018	550706	May 24, 2017	206569	Jun 23, 2017	Chemical for plant beds -	Voucher			45,761.41
Total Gross:				164,541.72	Total Discount:		.00	Total Net:		164,541.72
Grand Totals:				Gross:	164,541.72	Discount:		.00	Net:	164,541.72

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
The Sweet Potato Co. LLC			ID: 00160							
Paid Voucher										
71806	Feb 28, 2017	22817	Feb 28, 2017	202851	Mar 10, 2017	PAYMENT	Voucher			80,618.22
73713	Jul 21, 2017	72117	Jul 21, 2017	209103	Jul 22, 2017	PAYMENT	Voucher			6,000.00
73794	Jul 28, 2017	72817	Jul 28, 2017	209246	Jul 29, 2017	PAYMENT	Voucher			6,000.00
73959	Aug 04, 2017	80417	Aug 04, 2017	209819	Aug 05, 2017	PAYMENT	Voucher			6,000.00
74104	Aug 11, 2017	08112017	Aug 11, 2017	210131	Aug 12, 2017	PAYMENT	Voucher			6,000.00
74155	Aug 18, 2017	81817	Aug 18, 2017	210409	Aug 19, 2017	PAYMENT	Voucher			6,000.00
74271	Aug 25, 2017	82517	Aug 25, 2017	210742	Aug 26, 2017	PAYMENT	Voucher			2,000.00
100962	Jan 12, 2018	07132017	Jul 13, 2017	208798	Jul 14, 2017	Sales of 2008 FJ Cruiser	Voucher			-10,000.00
100962	Jan 12, 2018	07272016	Jul 27, 2016	192806	Jul 28, 2016	2016 Cuke Labor (1/2)	Voucher			-40,938.65
100962	Jan 12, 2018	08112017	Aug 11, 2017	210147	Aug 12, 2017	PAYMENT CK#74104	Voucher			-6,000.00
100962	Jan 12, 2018	103117	Oct 31, 2017	213673	Nov 01, 2017	OCTOBER INT	Voucher			22.20
100962	Jan 12, 2018	112916	Nov 29, 2016	198722	Dec 21, 2016	1/2 LABOR 2016	Voucher			-118,031.20
100962	Jan 12, 2018	112916	Nov 29, 2016	198721	Dec 21, 2016	Transfer from Wooten 201	Voucher			920,142.05
100962	Jan 12, 2018	113016	Nov 30, 2016	198743	Dec 21, 2016	PAYMENT TO CAPE FE	Voucher			-726,382.18
100962	Jan 12, 2018	113017	Nov 30, 2017	215289	Dec 01, 2017	NOV. INT	Voucher			21.67
100962	Jan 12, 2018	123117	Dec 31, 2017	215911	Jan 01, 2018	DECEMBER INT.	Voucher			22.57
100962	Jan 12, 2018	212809	Jun 15, 2017	208033	Jun 16, 2017	Freight on Cukes	Voucher			-589.00
100962	Jan 12, 2018	22817	Feb 28, 2017	202857	Mar 10, 2017	PAYMENT CK 71806	Voucher			-80,618.22
100962	Jan 12, 2018	33117	Mar 31, 2017	204700	Apr 01, 2017	MARCH INTEREST	Voucher			366.54
100962	Jan 12, 2018	33117	Mar 31, 2017	204699	Apr 01, 2017	FEB. INTEREST	Voucher			942.28
100962	Jan 12, 2018	43017	Apr 30, 2017	205923	May 21, 2017	APRIL INTEREST	Voucher			357.73
100962	Jan 12, 2018	53117	May 31, 2017	206884	Jun 01, 2017	MAY INTEREST	Voucher			372.70
100962	Jan 12, 2018	60616	Jun 06, 2016	190570	Jun 15, 2016	TRANSFER FROM BAILI	Voucher			88,043.29
100962	Jan 12, 2018	63017	Jun 30, 2017	208375	Jul 30, 2017	JUNE INTEREST	Voucher			363.74
100962	Jan 12, 2018	72117	Jul 21, 2017	209136	Jul 22, 2017	PAYMENT CK 73713	Voucher			-6,000.00
100962	Jan 12, 2018	72817	Jul 28, 2017	209330	Jul 29, 2017	PAYMENT CK 73794	Voucher			-6,000.00
100962	Jan 12, 2018	73117	Jul 31, 2017	209796	Aug 01, 2017	JULY INTEREST	Voucher			378.95
100962	Jan 12, 2018	80417	Aug 04, 2017	209854	Aug 05, 2017	PAYMENT CK 73959	Voucher			-6,000.00
100962	Jan 12, 2018	81817	Aug 18, 2017	210468	Aug 19, 2017	PAYMENT CK 74155	Voucher			-6,000.00
100962	Jan 12, 2018	82517	Aug 25, 2017	210784	Aug 26, 2017	PAYMENT CK 74271	Voucher			-2,000.00
100962	Jan 12, 2018	82917	Aug 29, 2017	210926	Aug 30, 2017	AUGUST INTEREST	Voucher			195.32
100962	Jan 12, 2018	93017	Sep 30, 2017	212333	Oct 01, 2017	SEPTEMBER INTEREST	Voucher			10.55
Total Gross:				115,298.56	Total Discount:		.00	Total Net:	115,298.56	115,298.56
Grand Totals:				Gross:	115,298.56	Discount:	.00	Net:	115,298.56	115,298.56

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
Wooten Land & Timber			ID: 09690							
Paid Voucher										
	Feb 07, 2017	02072017	Feb 07, 2017	202045	Feb 08, 2017	Monthly Payment-Int	Voucher			911.49
	Mar 22, 2017	03222017	Mar 22, 2017	203797	Mar 23, 2017	Monthly Payment-final-int	Voucher			457.64
	Feb 07, 2017	2072017	Feb 07, 2017	202044	Feb 08, 2017	Monthly Payment-prin	Voucher			54,462.42
	Mar 22, 2017	3222017	Mar 22, 2017	203796	Mar 23, 2017	Monthly Payment-final	Voucher			54,916.28
Total Gross:				110,747.83	Total Discount:		.00	Total Net:		110,747.83
Wooten Land & Timber LLC			ID: 09600							
Paid Voucher										
	Mar 22, 2017	01012017	Jan 01, 2017	200131	Jan 01, 2017	MONTHLY RENT (OTHEI	Voucher			6,034.52
	Jan 31, 2017	01012017	Jan 01, 2017	200130	Jan 01, 2017	MONTHLY RENT ON WA	Voucher			19,612.81
	Feb 28, 2017	02012017	Feb 28, 2017	202922	Mar 01, 2017	Monthly Rent on Watec	Voucher			19,612.81
	Mar 22, 2017	02012017	Feb 28, 2017	202921	Mar 01, 2017	Monthly Rent	Voucher			6,034.52
	May 30, 2017	05012017	May 01, 2017	206491	May 01, 2017	MONTHLY RENT ON WA	Voucher			19,612.81
	May 22, 2017	05012017	May 01, 2017	206490	May 01, 2017	MONTHLY RENT (OTHEI	Voucher			6,034.52
	Jul 14, 2017	07142017	Jul 14, 2017	208905	Jul 15, 2017	Monthly Rent	Voucher			6,034.52
	Nov 02, 2017	09012017	Oct 24, 2017	213604	Oct 25, 2017	September 2017 Monthly	Voucher			2,700.00
	Nov 30, 2017	09012017	Oct 24, 2017	213201	Oct 25, 2017	September 2017 Monthly	Voucher			3,334.52
	Mar 22, 2017	10012016	Oct 01, 2016	196273	Oct 01, 2016	MONTHLY RENT ON WA	Voucher			19,612.81
	Dec 08, 2017	10312017	Nov 20, 2017	214217	Nov 21, 2017	October 2017 Monthly Re	Voucher			3,334.52
	Nov 30, 2017	10312017	Nov 20, 2017	214648	Nov 21, 2017	October 2017 Monthly Re	Voucher			2,700.00
	Dec 08, 2017	10312017	Dec 08, 2017	215140	Dec 09, 2017	Over payment correction	Voucher			-19.99
	Dec 22, 2017	11282017	Nov 28, 2017	215612	Dec 01, 2017	November 2017 Monthly I	Voucher			3,314.52
	Jan 11, 2018	11282017	Nov 28, 2017	214569	Dec 01, 2017	November 2017 Monthly I	Voucher			2,720.00
	Feb 01, 2017	12012016	Dec 01, 2016	199909	Dec 01, 2016	MONTHLY RENT (OTHEI	Voucher			6,034.52
	Feb 01, 2017	12012016	Dec 01, 2016	199907	Dec 01, 2016	MONTHLY RENT ON SQ	Voucher			1,720.62
	Jan 11, 2018	12012017	Dec 01, 2017	216367	Dec 02, 2017	December 2017 Monthly I	Voucher			3,314.52
	Aug 04, 2017	8042017	Aug 04, 2017	209916	Aug 05, 2017	Monthly Rent	Voucher			6,034.52
	Sep 08, 2017	9082017	Sep 08, 2017	211327	Sep 09, 2017	Monthly Rent	Voucher			6,034.52
	Apr 28, 2017	MARCH 2017	Mar 16, 2017	203538	Apr 01, 2017	MARCH 2017 MONTHLY	Voucher			19,612.81
	Apr 28, 2017	MARCH 2017	Mar 16, 2017	203537	Apr 01, 2017	MARCH 2017 MONTHLY	Voucher			6,034.52
Total Gross:				169,458.92	Total Discount:		.00	Total Net:		169,458.92
Grand Totals:			Gross:	280,206.75	Discount:		.00	Net:	280,206.75	280,206.75

Payments

WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
Southern Roots			ID: 00130							
Paid Voucher										
	Jan 05, 2018	10518	Jan 05, 2018	216077	Jan 06, 2018	PAYMENT	Voucher			10,000.00
	Dec 01, 2017	120117	Dec 01, 2017	214940	Dec 02, 2017	PAYMENT ON CROP	Voucher			226,861.90
100503	Dec 08, 2017	120717	Dec 07, 2017	215073	Dec 08, 2017	PAYMENT	Voucher			10,000.00
100701	Dec 22, 2017	122217	Dec 22, 2017	215583	Dec 23, 2017	Payment on account	Voucher			5,000.00
100768	Dec 29, 2017	122917	Dec 29, 2017	215788	Dec 30, 2017	PAYMENT	Voucher			5,000.00
100966	Jan 12, 2018	11218	Jan 12, 2018	216369	Jan 13, 2018	PAYMENT	Voucher			10,000.00
Total Gross:				266,861.90	Total Discount:		.00	Total Net:	266,861.90	266,861.90
Grand Totals:				Gross:	266,861.90	Discount:	.00	Net:	266,861.90	266,861.90

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
Trinity Frozen Foods			ID: 9880							
Paid Voucher										
	May 03, 2017	195358	Jul 13, 2016	192224	Jul 14, 2016	Deducted from AR ck#89: Voucher				-5,050.50
	May 03, 2017	195360	Jul 13, 2016	192228	Jul 14, 2016	Deducted from AR ck#89: Voucher				-2,356.11
	May 03, 2017	195361	Jul 13, 2016	192225	Jul 14, 2016	Deducted from AR ck#89: Voucher				-6,015.00
	May 03, 2017	195463	Jul 13, 2016	192227	Jul 14, 2016	Deducted from AR ck#89: Voucher				-5,376.60
	May 03, 2017	195466	Jul 13, 2016	192226	Jul 14, 2016	Deducted from AR ck#89: Voucher				-4,644.45
	May 03, 2017	3698	Jun 03, 2016	192223	Jun 04, 2016	Packing charge on dice p Voucher				23,442.66
Total Gross:					.00	Total Discount:	.00	Total Net:	.00	.00
Grand Totals:			Gross:		.00	Discount:	.00	Net:	.00	.00

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
ARGO Investments of Columbus Inc			ID: 0163							
Paid Voucher										
71500	Feb 02, 2017	02012017	Feb 01, 2017	201811	Feb 01, 2017	Lease Payment on 2 Trail Voucher				900.00
71568	Feb 09, 2017	5.1	Feb 01, 2017	202203	Feb 01, 2017	Lease Payment on 2 Trail Voucher				1,175.00
71815	Mar 01, 2017	03012017	Mar 01, 2017	202933	Mar 02, 2017	Lease pymt on Sweet Pot Voucher				1,175.00
71815	Mar 01, 2017	03012017	Mar 01, 2017	202934	Mar 02, 2017	Lease Payment on 2 Trail Voucher				900.00
72267	Apr 03, 2017	04.03.2017	Apr 03, 2017	204300	Apr 04, 2017	APRIL 2017-1 SWEET POT Voucher				1,175.00
72267	Apr 03, 2017	04.03.2017	Apr 03, 2017	204299	Apr 04, 2017	APRIL 2017-2 Trailers and Voucher				900.00
72267	Apr 03, 2017	6	Apr 01, 2017	204298	Apr 02, 2017	APRIL 2017-LABOR CAMP Voucher				2,500.00
72675	May 01, 2017	05.01.2017	May 01, 2017	205492	May 01, 2017	LEASE PYMT ON 2 TRAIL Voucher				900.00
72675	May 01, 2017	05.01.2017	May 01, 2017	205493	May 01, 2017	LEASE PYMT ON 1 SWEET Voucher				1,175.00
72908	May 12, 2017	7	May 12, 2017	206133	May 13, 2017	May 2017 Labor Camp Rental Voucher				2,500.00
73121	Jun 01, 2017	06012017	Jun 01, 2017	206969	Jun 01, 2017	LEASE PYMT ON 2 TRAIL Voucher				900.00
73121	Jun 01, 2017	06012017	Jun 01, 2017	206970	Jun 01, 2017	LEASE PYMT ON SWEET POT Voucher				1,175.00
73121	Jun 01, 2017	8	Jun 01, 2017	206967	Jun 01, 2017	JUNE 2017 LABOR CAMP Voucher				2,500.00
73634	Jul 14, 2017	07012017	Jul 01, 2017	208331	Jul 01, 2017	LEASE PAY. ON 2 TRAIL Voucher				900.00
73634	Jul 14, 2017	07012017	Jul 01, 2017	208332	Jul 01, 2017	LEASE PAY. ON 1 SWEET Voucher				1,175.00
73634	Jul 14, 2017	1	Jul 14, 2017	208893	Jul 15, 2017	Payment #1 - lawnmower Voucher				1,000.00
73634	Jul 14, 2017	9	Jul 01, 2017	208333	Jul 01, 2017	MONTHLY LABOR CAMP Voucher				2,500.00
73908	Aug 02, 2017	08012017	Aug 01, 2017	209665	Aug 01, 2017	LEASE PAY. ON 1 SWEET Voucher				1,175.00
73908	Aug 02, 2017	08012017	Aug 01, 2017	209662	Aug 01, 2017	LEASE PAY. ON 2 TRAIL Voucher				900.00
73908	Aug 02, 2017	10	Aug 01, 2017	209667	Aug 01, 2017	MONTHLY LABOR CAMP Voucher				2,500.00
73908	Aug 02, 2017	2	Aug 01, 2017	209666	Aug 01, 2017	Payment #2-Lawnmower Voucher				1,000.00
74524	Sep 22, 2017	11	Sep 01, 2017	211115	Sep 01, 2017	SEPT. 2017 LABOR CAMP Voucher				2,500.00
74658	Oct 06, 2017	12	Oct 01, 2017	212355	Oct 01, 2017	OCT. 2017 LABOR CAMP Voucher				2,500.00
100334	Nov 21, 2017	09012017	Sep 01, 2017	211113	Sep 01, 2017	LEASE PAY ON 1 SWEET Voucher				1,175.00
100334	Nov 21, 2017	09012017	Sep 01, 2017	211112	Sep 01, 2017	LEASE PAY ON 2 TRAIL Voucher				900.00
100334	Nov 21, 2017	10012017	Oct 01, 2017	212353	Oct 01, 2017	LEASE PAY ON 1 SWEET Voucher				1,175.00
100334	Nov 21, 2017	10012017	Oct 01, 2017	212352	Oct 01, 2017	LEASE PAY ON 2 TRAIL Voucher				900.00
100334	Nov 21, 2017	3	Sep 01, 2017	211114	Sep 01, 2017	LEASE PAY ON 2017 JD Voucher				1,000.00
100334	Nov 21, 2017	4	Oct 01, 2017	212354	Oct 01, 2017	LEASE PAY ON 2017 JD Voucher				1,000.00
100531	Dec 08, 2017	11012017	Nov 01, 2017	213550	Nov 01, 2017	LEASE PAY. ON 1 SWEET Voucher				1,175.00
100531	Dec 08, 2017	11012017	Nov 01, 2017	213551	Nov 01, 2017	LEASE PAY. ON 2 TRAIL Voucher				900.00
100531	Dec 08, 2017	13	Nov 01, 2017	213764	Nov 01, 2017	NOVEMBER 2017 LABOR Voucher				2,500.00
100531	Dec 08, 2017	5	Nov 01, 2017	213552	Nov 01, 2017	LEASE PAY. ON 2017 JD Voucher				1,000.00
100675	Dec 22, 2017	12012017	Dec 01, 2017	214682	Dec 01, 2017	LEASE PYMT ON 2 TRAIL Voucher				900.00
100675	Dec 22, 2017	12012017	Dec 01, 2017	214679	Dec 01, 2017	LEASE PYMT ON 1 SWEET Voucher				1,175.00
100675	Dec 22, 2017	6	Dec 01, 2017	214683	Dec 01, 2017	LEASE PYMT ON 2017 J Voucher				1,000.00
100954	Jan 12, 2018	01012018	Jan 01, 2018	215958	Jan 01, 2018	LEASE PYMT ON 2 TRAIL Voucher				900.00
100954	Jan 12, 2018	01012018	Jan 01, 2018	215957	Jan 01, 2018	LEASE PYMT ON 1 SWEET Voucher				1,175.00
100954	Jan 12, 2018	7	Jan 01, 2018	215959	Jan 01, 2018	LEASE PYMT ON 2017 J Voucher				1,000.00
Total Gross:				51,900.00	Total Discount:	.00	Total Net:	51,900.00		51,900.00
Grand Totals:				Gross:	51,900.00	Discount:	.00	Net:	51,900.00	51,900.00

Payments
WAYNE BAILEY, INC

Check	Check Date	Invoice No	Invoice Date	Voucher	Due Date	Stub Description	Source	PO #	PO Date	Net/Paid
Mary Margaret Wooten Nealy			ID: 09983							
Paid Voucher										
89682	Jun 16, 2017	6162017	Jun 16, 2017	207708	Jun 17, 2017	Personal	Voucher			2,000.00
Total Gross:				2,000.00	Total Discount:		.00	Total Net:	2,000.00	2,000.00
Grand Totals:			Gross:		2,000.00	Discount:	.00	Net:	2,000.00	2,000.00

EXHIBIT G

Located at Chadbourn

Product	ID	Qty	Equivalent
RSP 18BU 1 WH Total	Southern Roots	55	55
RSP 18BU CAN CV Total		28	28
RSP 38BU 1 CV Total		1330.5	2809
RSP 38BU 1 CVORG Total		160	338
RSP 38BU 1 MU Total		193	407
RSP 38BU CAN CV Total		724.75	1530
RSP 38BU CAN CVORG Total		15	32
SEED 38BU CVG1 CVOrganic Total		3	6
SEED 38BU CVG3 CV Total		487	1028
SEED 38BU CVG3 CVOrganic Total		34	72
SEED 38BU ROG3 ROSE Total		35	74
SEED 38BU UNSP ROSE Total		97	205
SEED 38BU WHG3 WH Total		6	13
Grand Total		3168.25	6596

Product	ID	Qty	Equivalent
RSP 18BU 1 CV Total	MK's Farms	63	63
Grand Total		63	63

Product	ID	Qty	Equivalent
RSP 18BU 1 CV Total	Carmichael	362	362
RSP 38BU 1 CV Total		114	241
RSP 38BU CAN CV Total		1	2
Grand Total		477	605

Product	ID	Qty	Equivalent
RSP 18BU 1 CV Total	Warren Dixon	382	382
Grand Total		382	382

Located at Maxton

Product	ID	Qty	Equivalent
RSP 38BU 1 CV Total	Carmichael	3249	6858
RSP 38BU CAN CV Total		878	1854